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ABSTRACT

Described is a cooperative preschool program for 20 handicapped children on a rural Michigan setting. It is explained that the program involved screening procedures in a naturalistic environment, weekly parent training sessions, and diagnostic prescriptive teaching. Included in three appendixes are examples of news releases about the program, samples of developmental evaluation forms and observation checklists, and the results of a survey completed by parents at the end of the program. (CL)

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A Cooperative Prescriptive Developmental Program
For
Preschool Children with Handicaps In A Rural Setting

NICE Community Schools, Republic-Michigamme Schools
and
Marquette-Alger Intermediate School District

Rita P. Palomaki
Diane M. Koski

July 1974

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During the past year, while developing and directing the pilot preschool program, and over the frequently discouraging hours of writing, two people kept us going and helped us over many rough spots with patience and encouragement when needed. To them we dedicate this paper; our husbands:

Duane & Bill

And to two people very instrumental in preparing us for the task we thank:

Mrs. June Schaefer
Mrs. Rose Mary Zenti

We wish also to acknowledge the valuable contributions of all who worked with us in the establishment and operation of the Pilot Preschool Program.

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CHAPTER I

INTRODUCTION

Unprecedented interest in early childhood education has been evident since the mid-1960's. In an attempt to solve a poverty problem through education, the federal government allotted financial support to programs for young children from low income families. Another impetus for the interest stemmed from the women's liberation movement. This interest in adequate child care and stimulation continues to surge ahead even at the present. Professionals and lay people alike have been seriously regarding the

> capacity of the young child to learn and regarding the impact of early learning experiences on the full development of the child's potentials. Attention has been directed to helping the child develop a positive self-concept, motivation to learn, adequate social skills, emotional stability, and physical well being. Other important concerns have been the determination of the critical stages for the presentation of learnings, the important content to be learned, the most effective strategies for teaching the child, the effectiveness of learning, measurement or evaluation of relevant variables.[1]

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[1] Merle B. Karnes, Foreword to Not All Little Wagons are Red, ed. Rebbecca F. Dailey and June B. Jordan (Arlington, Va.: The Council for Exceptional Children, 1973), p. xi.

Head Start, and other programs that were developed, researched and evaluated in the 1960's, have provided knowledge important to the development of other programs for young children and are especially viable programs for young handicapped children. Some ninety model "First Chance" programs were developed throughout the country for early education of the handicapped. Other examples of nationally recognized programs developed are: the UNISTAPS/Model Preprimary Center for Hearing Impaired Children, 0-6, and the Families, St. Paul, Minnesota; A Model Preschool Program for Mentally Retarded, Seriously Emotional Disturbed, and Speech Impaired Handicapped Children in Southwest Arkansas, Magnolia, Arkansas; Developing Language and Perceptual Skills in Preschool and Early Educational Periods at Mississippi State University, State College, Mississippi; Preschool Project for Developmentally Handicapped Children, Chapel Hill, North Carolina; and Precise Early Education of Children with Handicaps (PEECH) at the University of Illinois, Champaign, Illinois, just to mention a few. All of these programs include parent involvement as a major component.

Early intervention allows the school and family to combine forces early in the life of the handicapped child and together set common goals and objectives that will help him maximize his potential. Research with mothers and siblings of learning disadvantaged children reveal that family members can acquire improved skills in developmentally delayed young children as reflected in the rate of development of the preschool child.[2]

> Although federal funding for early education is being drastically curtailed, there are some trends that kindle feelings of optimism. States are increasingly lowering the age requirement at which handicapped children receive services. Thirty-three states now allow programs for handicapped children below age six, with thirteen permitting programs to children at birth.[3]

Michigan requires that school systems provide appropriate services for handicapped children from birth to age twenty-five.

It is apparent that administrators of special education programs are beginning to reorder their priorities and allocate large proportions of the funds available to them to the identification of and early programming for young handicapped children. They are beginning to more fully recognize that the young years are the "payoff" years.

Early education is most important for young handicapped children because it can eliminate many problems that may become entrenched if they persist into later years, thus reducing the necessity for placement in special classes or for special services. In other words, preschool education can be a preventive program for many children who are prone to need special education. For others, preschool education can enable the handicapped to function at a higher level than is possible without early intervention. In terms of financial consideration, as well as promotion of fuller development of the potentials of a handicapped child, preschool education is a must.

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[2] See Merle Karnes et al., "An Approach for Working With Mothers of Disadvantaged Preschool Children," Quarterly of Behavior and Development 14 (1968): p. 16; Merle Karnes et al., "Educational Intervention at Home by Mothers of Disadvantaged Infants," Child Development 41 (December 1970): p. 929; and Merele Karnes et al., "A New Professional Role in Early Childhood Education," Interchange 2 (April 1971): p. 103.

[3] Merle B. Karnes, Foreword to Not All Little Wagons are Red, ed. by J. B. Jordan and R. F. Dailey (Arlington, Va.: The Council For Exceptional Children, 1973) p. xiv.

Special education, as is true of all education, is being held more and more accountable for programs. New programs that are developing, such as early education for handicapped children, will be expected to show results if support is to be obtained and maintained. Thus, ongoing evaluation is a must in order to produce the data necessary to convey the worth of a program.

The author, having worked as a speech clinician in public schools for a total of nine years, has become increasingly aware of the need for early identification and intervention. An analysis of the data and rationale written by experts in early childhood education supports this observation and has provided the impetus to design a prescriptive developmental program to meet the needs of preschool handicapped children in a rural area. The basic goals of this initial cooperative pilot program were:

1. to cooperatively (NICE Community Schools, Republic-Michigamme Schools, and Marquette-Alger Intermediate School District) develop and implement a screening procedure which enables evaluators to observe and record children's

true behaviors. Past experiences by this speech clinician in screening preschool children had proven that formalized testing data often provided skewed information because of the children's reactions to what was for them an unfamiliar, thus uncomfortable experience.

2. to identify the number of preschool children with significant developmental delays in learning. This would provide the Boards of Education of the districts with significant data enabling them to determine the feasibility of a full time preschool program for handicapped children in their respective districts.

3. to design and implement a prescriptive program for each child participating in the classroom sessions.

4. to utilize the Marquette-Alger Intermediate School District referral system for those children requiring additional services, e.g., medical, mental, health, audiological, social, etc.

5. to provide inservice training and materials to parents of children with specific learning needs but not severe enough to warrant a classroom program.

6. to provide intensive inservice training and classroom involvement to parents of children in the program.

7. to develop a descriptive evaluation system with a systematic continuous analysis of child progress, preschool staff effectiveness and parent effectiveness.

CHAPTER II

PROGRAM DESIGN AND DESCRIPTION

Screening children for identification of problem areas has been an accepted practice in Marquette and Alger counties for many years. The children in the districts have their vision and hearing tested by county health department technicians and their speech and language skills are screened by speech clinicians. The problem indicated in doing such screening the year before the children are in school is that once the children with problems are identified, there has been no follow-up program for helping these children and their parents so that some of the problems could be eliminated or at least decreased before the child entered school. With speech therapy classload limitations, it became evident to school administrators that additional teacher time was necessary for preschool children if these children were to obtain skills necessary for successful learning in the school setting.

The speech clinician for the NICE Schools and the Marquette-Alger Intermediate School District speech clinician assigned to the Republic-Michigamme Schools met with their respective superintendents to discuss the problem and explore possible solutions. All of the people at this meeting agreed it seemed unjust to identify children with problems if the school districts could not provide an adequate remedial program for the children and their parents.

It was at this time that the idea of a cooperative preschool pilot program was born. Preschool screening had usually taken place in April or May. Because of the numbers of children seen the area speech clinicians generally have helped each other with the testing. Both speech clinicians in the districts involved felt a need to change the screening from a rather formal testing situation to one where children would be more comfortable and thus the clinicians would see a more realistic sample of each child's behaviors and skills. They proceeded to develop such a screening situation. Screening done in the past showed children having a wide range of problems so plans for a follow-up program had to encompass remediation needs in many areas of learning.

The speech clinicians (preschool directors) began delineating their ideas for a preschool classroom program to be conducted on an experimental basis following the screening, if a sufficient number of children with problems were identified. The plans became the rough draft of a formal proposal. (See Appendix B, p.58) This draft was presented to the administrators of both districts and the decision was made to approach their Boards of Education requesting approval of a cooperative program between the

NICE and Republic-Michigamme School Districts. It was to include two weeks of testing and four weeks of a classroom program for remediation of children's problems. In addition, parents would be trained to help remediate problems thus providing a twenty-four hour, seven day a week program.

The speech clinicians assumed the positions of preschool directors and proceeded to write the proposal for the program. They then met again with administrators to put it in final form for presentation to their Boards of Education (See Appendix B, p.61) During this meeting with administrators, alternative ways to fund the program were discussed. Both school districts were able to use supplementary Title I monies recently allotted to them as well as some money from their general funds. A budget of $3,500.00 was approved for the program. The housing of the program was also discussed at this meeting. The program necessitated two separate centers because of the rural nature of the setting. Because no rooms were vacant in any of the schools in either district, it was necessary to consider other facilities. The most appropriate locations were the township hall on the perimeter of the NICE district (East Center) and the township community building on the perimeter of the Republic-Michigamme district (West Center). The superintendents issued the requests for the use of these facilities for the program and also sought the approval of the county health department and fire department for the use of the facilities. (See Appendix B, p.66)

Shortly after this administrators/preschool directors meeting the program proposal was presented to the Boards of Education at their regular meetings. The presentation in one district was done by the preschool director and in the other district by the superintendent.

Kindergarten Teacher Contact

All kindergarten teachers were contacted and requested to develop a list delineating those skills minimum to kindergarten readiness for entrance. This request would fulfill a need for uniformity of goals for preschool, as conceived by the kindergarten teachers and the preschool staff. The kindergarten teachers at that time were informed of the time and place for a group meeting between preschool directors and kindergarten teachers at which time all minimum readiness skills would be compiled and a uniform list of goals would be prepared.

Dissemination of General Program Information to the Public

To disseminate program information to the general public numerous vehicles were utilized. Direct contacts with the public were made through Parent-Teacher Associations (four), Preschool Story Hours (two), an activity sponsored by the Community School Division, where each week parents are provided with speakers dealing with various child care and development topics, and, finally, panel discussions (two).

The presentation by preschool directors at the Parent-Teacher Associations and the meeting of parents of children enrolled in preschool story hours dealt with an explanation of the preschool screening and diagnostic design, the classroom program, and a description of the parent involvement in the entire preschool program's progress. The directors requested the support of the parents, dissemination of information, cooperation in attendance of screening and donations of new and used children's play items. (See Appendix B, p. 67 and B, p. 69) Time was provided for the preschool directors to answer questions asked by parents concerning the Pilot Program.

The panel discussions provided an additional opportunity to the general public to direct their questions to professionals who specifically deal with the areas of administration of programs for handicapped, preschool children with learning deficits, and provide consultant services to the handicapped. The discussions were divided between two panels. Panel members included the Superintendent of the Marquette-Alger Intermediate School District, the Superintendent of the Republic-Michigamme School District, the Superintendent of NICE Community Schools, the Curriculum Coordinator of NICE Community Schools, the Preschool Coordinator of the Marquette-Alger Intermediate School District, the School Psychologist of Marquette-Alger Intermediate School District, the Consultant to the Emotionally Disturbed of the Marquette-Alger Intermediate School District, and the two preschool directors. Each panel member described his role (five minutes), and the preschool director on each panel outlined the preschool program. The public was then invited to address their questions to the panel. Once questions appropriate to this group appeared exhausted, the panels exchanged places to afford both groups of people an occasion to address their questions to the desired specific panel participants. Time was allotted at the close of the panel discussions for informal conversations, thus enabling people to direct their concerns to specific individuals.

News articles were released to local newspapers, radio and television stations two weeks prior to the screening dates. School bulletins to district residents were one other vehicle employed to circulate information concerning the Preschool Pilot Program, its purpose, goals and implications. (See Appendix B, p.70)

The preschool directors and kindergarten teachers met after school on January 28, 1974. During this meeting the preschool directors explained in detail the planned screening, testing and classroom program. The teachers were aware that their concerns for children who were failing kindergarten had been an impetus for the preschool directors and administrators in developing the preschool program. All kindergarten teachers brought to the meeting a written list of minimum skills which each felt was necessary for kindergarten entrance if a child was to succeed on the kindergarten level in these particular systems. (See Appendix B, p.71)

It was soon discovered that not everyone was in full agreement but with discussion of mutual concerns a compiled list evolved. The kindergarten teachers also decided that it might be helpful for all parents of children entering kindergarten the next year to have a booklet discussing such skills and suggested activities they might wish to do at home with their children to encourage the development of these skills at their own child's pace. They proceeded to make plans of writing such a booklet and the decision was made to distribute it to the parents at the time of screening. Arrangements were then made with the kindergarten teachers to have them visit the preschool classroom program for at least one-half day so they could observe the children who would be in their classes the following year. Substitute teachers would be in their classrooms thus releasing them for the visitation. Tentative dates for the visitations were agreed upon. Kindergarten teachers were also informed that individual files would be made for each child screened and these files would be given to them at the conclusion of the program. They would also receive more extensive files on those children who required diagnostic work-ups and those children participating in the classroom program.

After the administrators and preschool directors had proceeded individually on areas for which they were responsible, a work meeting took place. The first item on the agenda was financing. (See Appendix B, p.72) It was decided that each district would purchase equipment for one of the centers and thus have it for use in possible future programs. It was also decided for ease in bookkeeping that all bills for equipment and supplies would be issued to the Republic-Michigamme School District and that they should bill the NICE School District for one-half of the total. Each center was to have two teachers and one teacher aide. It was anticipated that the children in the West Center would be from both districts and the children in the East Center would be from the NICE School District only. This prediction was based on total school population statistics. Therefore, the preschool directors would be the teachers in the West Center while the NICE preschool director plus an assistant teacher would be the teachers for the East Center. The East Center's sessions would be held in the mornings while the West Center's sessions would be held in the afternoons. The preschool directors were already under contract. The assistant teacher for the East Center was hired on the NICE classroom aide's salary schedule. (The Republic-Michigamme system has no salaried classroom aides at this time). One-half of the salary for the aide at the West Center was paid by the Republic-Michigamme district. A budget of $925.00 for equipment and supplies was designated during this meeting so that materials could be ordered as soon as possible. Because the programs were in session at different times of the day it was possible to share some of the materials. The items shared however had to be easily transportable.

A mileage budget was involved for both preschool directors since one drove from the Republic-Michigamme school to the West Center and the other from the East Center to the West Center. Mileage was paid to each director by her school district (NICE and Marquette-Alger Intermediate School District) according to the dictates of each master contract.

Duplicating services were purchased from the Marquette-Alger Intermediate School District and the cost divided equally between the Republic-Michigamme and NICE systems. These services were used for the duplication of letters to parents of children to be screened, goals, and objectives of the program sent to parents, 300 case history forms, 300 observation check lists and 300 DEPS forms plus 10 DEPS manuals.

The need to transport the children who would be in the program was explored. The NICE district felt they could not assume the additional financial burden of transporting preschoolers. The Republic-Michigamme district said they planned to bus the preschoolers from their district to the program at the West Center. Car pools were discussed as a possible alternative for children from the NICE district. Both school districts eventually did transport the children.

All necessary approvals for the use of township facilities as classrooms were finalized, and the East and West sites were designated for the programs.

The preschool directors and administrators went over the final draft of the screening process and scheduling procedures. Evaluation procedures were discussed in detail. It was decided that five methods of evaluation would be used. The programs would be video taped at least once a week. Video tape equipment was borrowed each week from the Marquette-Alger Intermediate School District Media Center located in Marquette. A technician to run the equipment was provided through the (VALID) Project at the Marquette-Alger Intermediate School District. A schedule for the video taping was written by VALID personnel and the preschool directors shortly after the meeting. Audio taping of parts of sessions would also be used--particularly the BASICS sessions. The BIR sheets could then be used to analyze the sessions. The individual behavioral objectives written by the preschool staff would be a means of evaluating the individual progress children were making in the remediation of their handicaps. Parent evaluation in terms of the changes they could observe in their children and their opinions of the parent training was planned as another means of evaluation. The fifth means of evaluating the program was that of staff critiquing. Such verbal critiques (preschool directors would take notes) was to be done at the end of the first day of screening, at the end of the screening week, at the end of the first day of the diagnostic week, at the end of the diagnostic week, and at the end of each day of the classroom program.

It was necessary to order equipment and materials as soon as possible if they were to arrive in time for the program. The majority of materials were ordered from school supply companies. The large preschool play equipment was made to specifications by the people working at the Sheltered Workshop of Alger and Marquette Counties (SWAM). Some smaller play equipment, such as stacking blocks, was made by students in the Marquette-Alger Intermediate School District Trainable Mentally Impaired classrooms. A request was made at the work meeting for any available soft goods from districts' school buildings. Such goods as paper, crayons, scotch tape, masking tape, paper clips, primary pencils, and glue were provided by the schools. A donation drive in the local communities was planned. Letters were sent home with children to ask for used play items. All diagnostic and screening tests, manuals, and forms not available in the districts were ordered.

Because of the unique design of the screening and diagnostic processes a total of fourteen professional and para-professional people were involved. Although it was necessary to hire some of these people on the preschool budget, most were already part of the intermediate school district staff. Personnel assigned to the program were:

Coordinator of Preschool Programs-Marquette-Alger Intermediate School District

Psychologist (specialized in early childhood education)-Marquette-Alger Intermediate School District

Home Programmers (three) (work with handicapped preschool children especially ages 0-3 in the home)-Marquette-Alger Intermediate School District

Speech and Language Pathologist (three)
One-hired by Republic-Michigamme district
Two-hired by NICE district

Student teacher in speech and language pathology-
Northern Michigan University; Marquette, Michigan
(working under the supervision of one of the preschool
directors)

Assistant teacher (certified special education teacher)-
NICE district

Teacher aides (two)
One-hired by Republic-Michigamme and NICE for the West
Center
One-hired by NICE for the East Center

Preschool directors (two)
One from NICE
One from Marquette-Alger Intermediate School District
with one-third contracted by Republic-Michigamme

Both preschool directors were speech and language pathologists and trained BASICS leaders.

It was decided that all of the previously mentioned individuals would be involved in the screening process and that all except the three speech and language pathologists who were hired would be involved in the diagnostic process.

At this meeting the procedures and time line for hiring personnel was decided. The superintendent of Republic-Michigamme posted the positions in the local newspaper. It was decided that the preschool directors would interview the candidates with an administrator in attendance. The preschool directors prepared questions to be used during the interviews. (See Appendix B, p.73) One secretary in each district was responsible for accepting applications for the positions. The preschool directors arranged the interview schedule.

Interviewing

Positions for two para-professionals (teacher aides) and one assistant preschool teacher were posted in each building of the two districts. An advertisement was published in the local newspaper making the positions available to qualified individuals outside of present district staffs. (See Appendix B, p.73) Scheduling of appointments was facilitated by the secretaries in the respective districts. Teacher aide interviews were scheduled every twenty minutes. Interviews of prospective assistant teachers were scheduled at thirty minute intervals.

Interviews were conducted by the preschool directors with an administrator in attendance. The format of the interveiws included presentation of the job description by a preschool director, questining of candidate, posing of situations, and an open question period affording the prospective preschool staff member an opportunity to clarify his concerns and questions. (See Appendix B, p.74)

Upon completion of all interviews the preschool directors and administrators conferred and, based on impressions made during the interviews, qualifications, and recommendations, people were selected for the preschool staff positions. These individuals were informed by letter of their selection for the positions. Those individuals not chosen were informed in writing that the positions were filled and were commended for their interest in the [illegible]school program.

Training Session for Screeners

The week before the screening program began, a half-day training session was held for the screening staff. After meeting together where the screening process was reviewed and roles defined, the group broke into smaller groups for instruction in specific responsibilities. The speech clinicians and student clinician, who would all be administering the DEPS and the Denver Test of Articulation, met with Mr. Jeff Miller, a Marquette-Alger Intermediate School District Speech and Language Clinician, who with Mr. John Sormunen developed the DEPS. The teacher aides met with one of the preschool directors who outlined the responsibilities and the functions of each. One teacher aide was designated to meet parents and children when they arrived; see that the children were given name tags; and that parents were directed to the parent area, supplied with coffee and the case history forms they were to fill out. Further, she would also be available to answer questions concerning the case history forms. The other teacher aide was instructed to attach the children's name tags to the front of their shirts with a large safety pin and then bring them to the play area where they were free to pursue whatever interested them. She was responsible for moving children from the play area to the testing areas as necessary and was also responsible for insuring that every child progressed through the entire screening process before leaving. The preschool directors would be conducting a BASICS session for screening and had previously planned together. The remaining screening staff; preschool coordinator, psychologist, home programmers and the assistant teacher were to be observers and recorders of children's behaviors in the play area. During discussion in the training session it was decided to work cooperatively by the play area staff, frequently consulting with one another. They reviewed the prepared check list, adding their own suggestions.

Screening

In recent years, there has been increasing activity in the early identification of preschool-age handicapped children. One of the major reasons for this new interest has been the recognition of the importance of the first six years of life in shaping the future development of children. Screening is the method utilized to filter out those children with indicated learning deficits. It is of utmost importance that screening tests only be employed for their indicated purpose--namely the mass testing of large preschool populations to separate those children who have a high likelihood of manifesting a handicap. Therefore, it is important to remember that screening evaluations do not make a diagnosis and that negative results can only be interpreted as indicating that a child may have a problem. In order to insure that the screening results are realistic, screening tools need to be devised which will enable the screening personnel to evaluate each child's genuine behavior, not behaviors which are created, because they are placed in a foreign setting and requested to perform tasks which are unfamiliar. All children with suspected problems as revealed through screening must receive follow-up either through referrals or prescriptive planning. The three objectives of this particular Preschool Pilot Screening process were:

1. to screen all four and five year olds entering kindergarten and as many three year olds as possible.

2. to develop a screening design whereby children's realistic behaviors are stimulated and evaluated.

3. to provide follow-up to children with indicated learning problems.

Scheduling of children for screening was handled in three ways. In the NICE Community School District all children registering for kindergarten received an appointment time. Parents of children, who would be four years of age on or before December 1, 1974, were sent letters asking them to call the secretary at Ely Elementary School for an appointment for their child. Republic-Michigamme Schools mailed letters to parents of all three, four and five year olds requesting that they phone the school secretary for a screening appointment. In both districts, parents received a copy of the objectives for the screening program and a letter describing the screening procedure. (See Appendixes B, p.76 and B, p.77)

The secretaries scheduled all children entering kindergarten in either the 9:00 a.m. or 1:00 p.m. block of time. The 10:30 a.m. time slot was reserved for children who would be four on or before December 1, 1974. Each ninety minute block included eighteen children. Children in specific areas of the districts were scheduled as follows: Monday, National Mine; Tuesday and Wednesday, Ishpeming Township; Thursday Morning, Ely; Thursday Afternoon, Ely and Champion; Friday Morning, Republic-Michigamme and Ely; and Friday Afternoon, Republic-Michigamme. (See Appendix B, p.78) On Monday, Tuesday and Wednesday, children were to be seen at the Ishpeming Township Fire Hall, on Thursday and Friday they were to be screened at the Michigamme Community Building.

Each child's name, birthdate, parent's name, address and telephone number were included on the scheduling form. (See Appendix B, p.79)

The screening test battery was carefully selected so as to meet the criterion of creating a naturalistic setting, thus enabling the evaluators to record typical behavior. The conviction of the preschool directors that there is a vital need to assess children's development in a realistic, relaxed setting is shared by Dr. William J. Meyer.[4] In speaking of program evaluation and planning, he identifies three crucial attributes:

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[4] William J. Meyer, "An Early Education Center with a Developmental Approach," in Not All Little Wagons are Red, ed. J. B. Jordan and R. F. Dailey (Arlington, Va.: The Council for Exceptional Children, 1973), p. 80.

1. There is a need to reexamine the instruments used for assessing the apptitudes of children and achievement outcomes, and these instruments must be process oriented.

2. Observational research in the naturalistic setting which emphasizes the individual child's encounter is crucial.

3. Indices of cognitive functioning must be related to behaviors in the naturalistic setting, and these relationships must be examined for individuals over time.

The screening battery included:

1. The Developmental Evaluation for Preschoolers Test (DEPS) and the Denver Test of Articulation were administered by three speech and language clinicians and a student speech and language clinician. (See Appendix C, p.81) The DEPS Test was utilized primarily because it gave the evaluators an opportunity to view a child's behavior, one on one, during a number of different tasks, including fine-motor, gross-motor, language, and imitation. Although a developmental score is derived, each evaluator wrote detailed behavioral notes for each child. The Denver Articulation Test afforded the screeners the opportunity to evaluate the child's speech sound development and determine its adequacy.

2. A BASICS lesson was conducted by the preschool directors. Three to six children were seen at a time. The lesson dealt with observing, recalling, and noticing differences and similarities skills. The items used in the lesson were a live gerbil and goldfish. One director conducted the lesson, while the other took notes. (See Appendix C, p.91) Information was recorded concerning language interaction patterns, grammatical structure of sentences, number of verbalizations, attending abilities, ability to verbalize observations, information recalled, similarities and differences, capabilities in clarifying and extending or building on their responses, and any other behaviors deemed significant by the director recording data.

3. An area was designated for play observation. Evaluators assigned to this area were: Marquette-Alger Intermediate School District Preschool Consultant, Marquette-Alger Intermediate School District School Psychologist (specializing in preschool children), Assistant Preschool Teacher, and three Home Programmers. Each Evaluator was assigned specific children to observe, however, they were encouraged to consult with one another whenever they viewed a child's behavior as being inappropriate. The observer could interact with the children or observe and record behavioral data. An observation checklist was utilized primarily as a

guide to specific behaviors that are significant in analyzing a preschooler's behavioral development. (See Appendix C, p. 93) The most vital information derived from the play area was the detailed behavioral notes, written by the evaluator on each of their assigned children.

4. While their children were being screened, parents were asked to fill out a case history form. (See Appendix C, p.96) A teacher aide was trained to deal with questions parents might have in completing the form. The case history provided factual background information about each child. In addition, it disclosed how parents viewed their child's development and the techniques they choose to apply in child management.

5. Hearing screenings were conducted by the preschool directors. These evaluations were conducted upon the request of any of the screening personnel, based on their observations of a child's reaction to the acreening setting. A hearing evaluation was conducted when a particular behavior pattern appeared which may indicate a possible hearing loss.

The screening sites were divided into four evaluation areas:

1. Quiet testing area
2. Play area
3. BASICS area
4. Parent area

The quiet testing area was divided into four testing stations with a table designated for each tester. This area accommodated four children at a time. Each child was seen for a twenty-minute period.

Housekeeping-play equipment, puppet theater, climber, see-saw, coloring books, story books, hoppty-hop balls, dolls, blocks, trucks and other items were a part of the play repertoire in the informal play area. The number of children in this area varied from three to eighteen or more. A large area, apart from the quiet area was designated for play.

(See Appendix C, p.99) The toys were strategically placed attempting to separate active gross-motor play from creative and fine-motor play. Six evaluators were stationed in this area at all times, primarily in an observational role, but also as a safety precaution.

A small quiet area separate from the other test areas was utilized for the BASICS lesson. Children (three to six per lesson) were seated either on a carpeted floor or tumbling mats. The director collecting data sat on a folding chair apart from the children. Time allotted for the BASICS lesson was approximately fifteen minutes.

Parents were seated at tables within view of the play area but carefully separated from it. A teacher aide was assigned to this area and parents were asked to remain there during the testing. Coffee was made available to them.

As children and parents arrived, a name tag was placed on each child which also indicated his birthdate. Parents were directed to the parent area and all children were placed in the play area. A teacher aide was assigned the responsibility of grouping and moving the children to the various screening areas. The play area acted as a nucleus. Children were moved in and out of this area. A specific colored star was used to signify each screening area. When a child had completed the evaluation in a particular area, a staf was glued on his name tag. A child had completed screening when he had three stars on his name tag. The teacher aide was responsible for checking which stars a child had and grouping them and moving them to screening stations, accordingly. Lists of children were posted in each area and names of children completing tasks in that area were checked. The teacher aide cross-checked with a master list.

Daily staffings were held. All data concerning each child were compiled. Recommendations were made for children with indicated handicaps. At the close of the week, a comprehensive staffing was held. Children with possible problems were selected for the second week of diagnostic evaluations. This group included fifty-seven children out of a total screening population of 240. All children with possible learning deficits were scheduled for diagnostic week evaluations.

Post Screening Follow-Up

The week after the screening involved making a comprehensive list of all children who were tested and the tests administered to them. This acted as a check to insure that no one had been excluded. (See Appendix C, p. 102) The tests were compiled and placed in the child's individual file folder. The test results and staffing notes were reviewed and the child's name was placed on one of three lists. One list was of children to participate in diagnostic sessions the next week (these were children who indicated possible problems during rhe screening process). Those children whose indicated problems appeared to be maturational were placed on the Test-Retest in Fall list. (See Appendix C, p. 103) Also placed on the Test-Retest in Fall list were those children who failed to attend the screening session. The third list was of those children who had no indication of any learning problems. Parents of those children being asked to return the following week for the diagnostic sessions were contacted by phone. This was a time consuming process because it was frequently necessary to alleviate parents' anxieties. Post cards were sent to all other parents to indicate that their child would be evaluated in the Fall or that their child had no learning problem at the present time. (See Appendix C, p. 104)

Letters of appreciation were written to the speech and language pathologists who had participated in the screening process. On Friday the preschool directors and administrators met to discuss the effectiveness of the screening process and the comprehensive list of children tested and recommendations made by the screening staff.

Diagnostic Week

Fifty-seven children were scheduled to come in for diagnostic sessions during the next week. Each child was seen by various professionals who administered appropriate diagnostic tests. The staff involved in this week of the program included: preschool coordinator, psychologist, three home programmers, speech pathology student teacher, assistant teacher, two teacher aides and the two preschool directors. The play setting was again used as a center of activity and for observation of behaviors. In the opinion of the preschool directors, the most important diagnostic tool used was that of diagnostic therapy. It soon became evident that much should be learned about what was going on within a child from watching and describing his behaviors and interacting with him in specific situations. The judgements of the skilled people working with the children appeared to indicate far more about individual differences of a child than the score on any test. However, some valuable information was obtained from various tests. Specific tests were administered to a child only when his needs indicated the necessity for obtaining the information. The tests used were selected from:

1. Basic Concept Inventory
2. WISC
3. Stanford Binet
4. Purdue Motor Survey
5. ITPA
6. Boehm-Test of Basic Concepts
7. Goldman-Fristoe Test of Articulation
8. BERRY Developmental Test of Visual Motor Integration
9. Peabody Picture Vocabulary Test
10. Goldman-Fristoe-Woodcock Test of Auditory Discrimination

11. Goodenough Draw-A-Man

12. Frostig Developmental Test of Visual Perception (It is the feeling of the preschool staff that this test was not appropriate for such young children)

13. Diagnostic Therapy

14. Audiological Assessment

Intelligence testing was done only when it was required for an Educational Placement and Planning Committee (E.P.P.C.) meeting to determine a question of mental retardation. However, even then it was done only if the staff agreed that the child's language abilities were adequate enough to allow for reliable test results. Kirk in discussing the educability of intelligence expressed the opinion of the preschool staff quite well. He says,

> In trying to prove the educability of intelligence, I have followed two principles. One was to start with young children; hence, the emphasis on preschool experiences. The other was trying to make an analysis of children's abilities in such a way that we can institute remediation. If we can't assess children in terms of potential treatment, we have a problem. This is one of the gross limitations of IQ scores. What good is the IQ from the point of view of treatment and education? It is merely an average score of a lot of mental functions partly dependent upon the environment and partly upon heredity. Its just like saying, This river's average depth is three and one-half feet; and when you start to walk, you find that it's only two inches on the sides and ten feet in the middle, and you can sink or swim.
>
> Another problem with the use of IQ scores is that one child with an IQ of seventy often differs greatly from another child with the same IQ. Their handicaps may be very different which means their educations have to be different. It is incorrect to think that IQ scores can determine the educational program for a child. It never was set up for that purpose. An IQ test is a classification instrument which says he is bright, dull, or normal if he is raised in the average environment,

> which is white middle class protestant, on which the test was standardized.[5]

Intelligence tests were necessarily given to two children of the fifty-seven involved in the diagnostic week.

The final staffing was conducted on Friday of the diagnostic week. The entire preschool diagnostic staff and administrators participated. Final recommendations for class placement were made and a class list for each center was compiled. Referrals to other agencies and programs were discussed and the Marquette-Alger Intermediate School District Preschool Coordinator accepted the responsibility for making those referrals--many of them medical or social-emotional in nature. A list was compiled of those parents who could benefit from inservice programs in child management and/or specific learning areas.

Post Diagnostic Week Follow-Up

A record week devoted to post-diagnostic follow-up and classroom preparation followed the diagnostic week. During this week, program objectives were defined and delineated. A diagnostic report was written for each child identified as suitable for the program. The parents of children selected for the program were contacted by phone.

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[5] Samuel A. Kirk, "The Educability of Intelligence: Start with Young Children," in Not All Little Wagons are Red, ed. J. B. Jordan and R. F. Dailey (Arlington, Va.: The Council for Exceptional Children, 1973), p. 15.

During the phone conversation, the preschool directors outlined the reasons their child had been identified as a candidate for the classroom program, related the purpose and rationale for the preschool program, and described the parent involvement in the preschool process.

Parents of children participating in the diagnostic week, but not selected for the classroom program, were notified by post card concerning the findings and implications of the diagnostic week testing.

Daily lesson plans were developed for the first week of the classroom program. All hectographs and forms necessary for the first week of the program were duplicated. A notebook including blanks for keeping daily logs was organized with a section devoted to each child. (See Appendix C, p. 107)

The preschool staff designated one working day for preparation of the classroom. During that day, bulletin boards were designed and set up, supplies necessary for the classroom program were organized, and the room was arranged. All testing materials used in screening and diagnostic testing materials were stored or returned to appropriate people and places.

The preschool directors met with the administrators during this week. At this time, they informed the administrators of which children had been identified for the program and results of all other diagnostic testing.

Final plans were made concerning bus schedules. It had become evident during the diagnostic week that unless the school districts provided transportation for all children enrolled in the classroom program, the majority of the children would be unable to attend. With this in mind the districts developed a cooperative bussing design.

Classroom Program

As a result of the screening and diagnostic processes twenty children were identified who indicated specific learning needs which could be met through a prescriptive classroom program. The children were involved in a two and one-half hour daily program for a period of four weeks. The teaching staff included two certified professionals (teachers) and a paraprofessional (teacher aide) per center.

The primary budget expenditures for this portion of the total program included staff salaries, equipment and materials, consumable goods, a petty cash fund, and the video and audio tapes used for evaluation.

All local news media (e.g., television, radio, newspaper) were utilized as vehicles to disseminate information about the program and to develop a supportive structure for the continuation of the preschool developmental classroom concept.

When approaching the task of setting the daily schedule some considerations were: (See Appendix C, p. 105)

1. sequencing activities so peak attending periods were scheduled during the most advantageous times of the sessions. Active group work was staggered with concentrated prescriptive work to insure greater internalization of learning.

2. Based on individual needs, various types of groupings were deemed appropriate for learning activities such as total group, small group (two to six children), and individual.

3. A multisensory approach to learning was utilized throughout the program to give all the children the opportunity to experience all levels of sensory learning.

4. Because of a commonality among the handicaps of the children (lack of attending skills) each day was carefully structured. However, within that structure appropriate social interaction and spontaneous verbal interaction were encouraged (child-child and adult-child interactions).

5. Verbal and nonverbal inappropriate behaviors were placed on extinction.

6. Specific BASICS teaching strategies were utilized throughout the program so that:

   a. The child would experience consistent success in all activities carried on in the program therefore stimulating greater production and more rapid learning gains.

   b. The teacher would better understand all dimensions of learning situations through the childrens' responses and reactions to the open learning atmosphere.

   c. The children would have continuous opportunity to learn to listen to and build on their peers' responses in a variety of situations.

7. A prescriptive design was implemented because of the wide range of handicaps manifested by the children.

Areas of Remediation

Based on a theoretical model developed by C. E. Osgood[6] as a means of evaluating learning disorders activities were designed to accomplish prescriptive remediation of the children's problems. The composite model is designed so that learning is divided into three processes: decoding, which is input; association, which is in the cognitive area; and encoding, which is output. The processes are then divided into levels: projection, which is the reflexive (decoding and encoding) level; integration, which is imitative and a combination of reflex and perception; and representational, which is the level of meaning. The next dimension of Osgood's model is memory. Memory is fundamental to the development of all channels of communication. It is divided into two specific areas; long-term memory and short-term memory. The dimension of feedback is divided into internal and external feedback which is inherent to the accuracy in all thinking--to making judgements as to the appropriateness of encoding.

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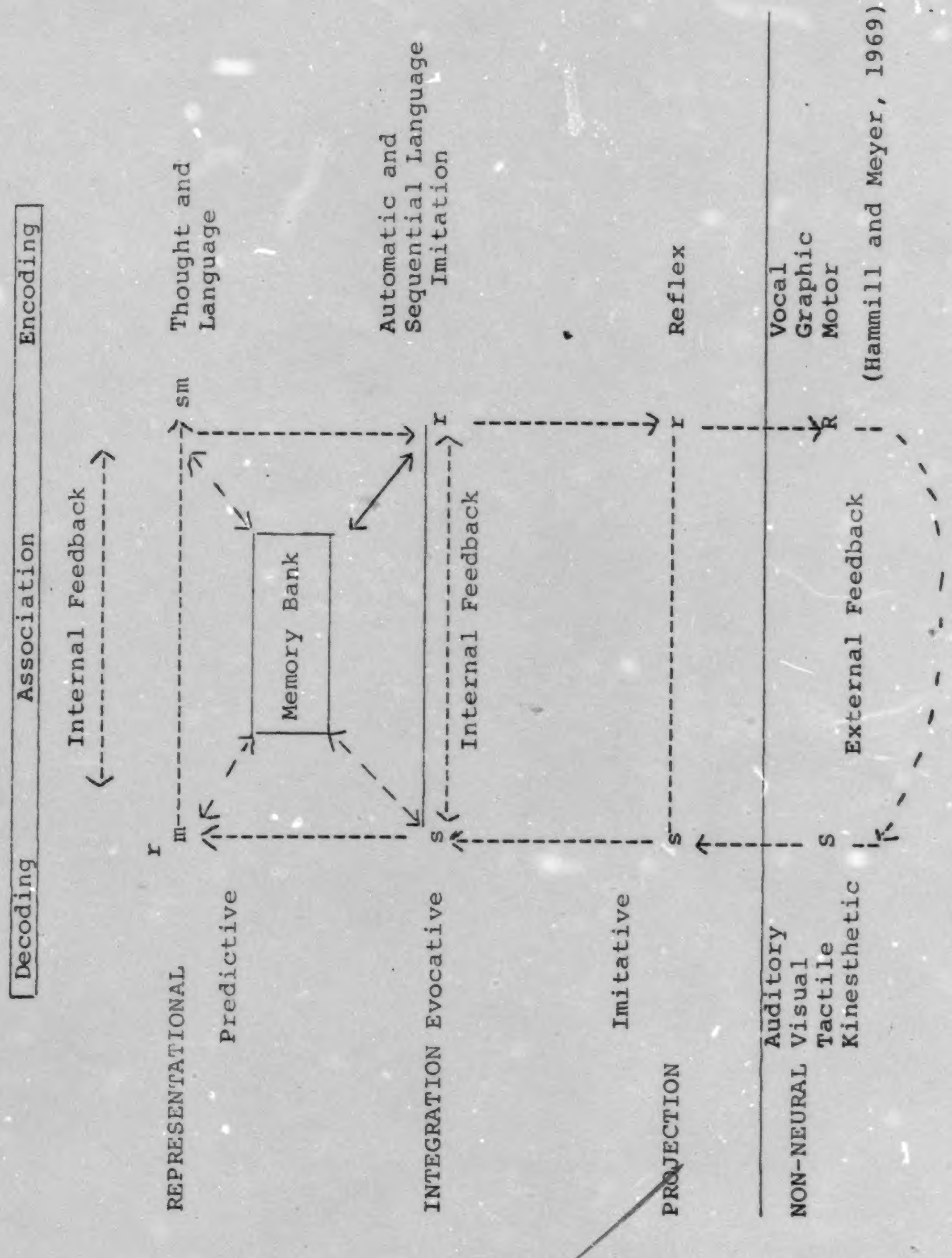
[6] Donald Hammill and Patricia I. Myers, Methods for Learning Disorders (New York: John Wiley and Sons, Inc., 1969), p. 36.

The last dimension of the composite model deals with channels of communication which is the sensory motor path through which language is transmitted. The stimulus modalities are; auditory, visual, kinesthetic, gustatory, olfactory, and tactile. The encoding process is dependent upon a particular decoding process and is observed as either a motor activity (fine or gross) or a vocal response. In determining various activities the modality combinations are numerous, for example: auditory-vocal, auditory-motor, visual-vocal, visual-motor, tactile-motor, and other combinations of input-output. The modes of input-output which are of most interest to teachers and clinicians are auditory-vocal and visual-motor because they have the

THE COMPOSITE MODEL



(Hammill and Meyer, 1969)

strongest relations to learning. Within the structure of this particular preschool program it was felt that a multisensory approach should be taken in remediation to insure the utilization of each child's strongest modes for decoding and encoding.

A BASICS lesson demonstrates the function of the composite model in classroom application. (See Appendix C, p. 111) The BASICS lesson deals with a verbal response to visual and auditory stimuli. The visual stimulus was a gerbil while the auditory stimulus was the voice of the teacher asking a question dealing with the visual stimulus. In the initial introduction at the projection level are visual and auditory sensory signals which at the integration level are associated with past experiences that are drawn from the memory bank. These are then integrated into a whole sensory stimulation. At the representational level the child then responds to the sensory intergration with the meaning of the visual stimulus (gerbil) and question "What do you notice about this?" which elicits previously learned motor integrations. Thus, the child pulls from the memory bank any and all information he has learned about gerbils or animals similar to them and transfers that information into a motor signal. That internal response elicits the first stage of the encoding process which is self-stimulation. This is associated to the conditioned reflex leading to vocalization. The vocalization reflex is on the projection level and the actual activity of vocalizing is at the integration level represented by the motor response patterns for speaking--sequencing of sounds and muscular activity. At both the integration and representational levels a part of the encoding production is fed back through the system for change or remediation, if necessary.

Thinking in terms of Osgood's composite model and its use as an evaluation tool of the learning activities used in the classroom, it follows logically that based on these learning processes specific behavioral objectives can be written once you have examined a learning activity and determined its components. For example, in the preceding sample of a breakdown of a BASICS lesson the behavioral objective which would be appropriate for a child showing deficits in these areas (auditory-visual, vocal) would be: Upon presentation of the concrete item (gerbil) and the question "What do you notice about this?" a child should respond verbally with a minimum of two accurate observations. The implications of this series of analyses leading to a prescriptive teaching system (individual behavioral objectives) are such that a continuous diagnostic process is an integral part of the daily teaching.

Because of this ongoing diagnostic process at the end of each day a period of one hour was designated to review notes taken on the children during various activities and the effectiveness of the teaching strategies. Based on that information, the child's behaviors were charted and lessons were designed according to his individual movement through the learning process. Further the teaching staff altered, modified, or continued the teaching techniques according to appropriateness to the child's needs.

The last and most important aspect of any program designed to meet handicapped children's learning deficits is its facility to transfer that learning and the techniques utilized to all those individuals who are significant as modifiers of a child's development. These people, for a child of preschool age, are parents, older siblings, others living with the family and babysitters (especially if both parents work). To extend this group of people one step further the program should facilitate follow-up to the next instructional individual who will be in charge of the child's learning (e.g. kindergarten teacher, Head Start teacher, nursery school teacher, speech and language pathologist, resource room teacher, etc.).

Parents were trained in specific techniques and were given weekly opportunities to try these techniques in learning activities with the children. This involved parents coming in twice a week--once for training with a preschool staff member and once for a tryout in the classroom. The classroom tryout provided the parent with immediate feedback stressing what they were doing well and what modifications were necessary before reinforcement was done at home, thus, insuring a seven-day a week, twenty-four hour a day program for the child.

Instructional personnel who would be working with a given child the following year observed the child in the classroom setting with specific emphasis on how the child was functioning in the setting and the particular methods used to achieve that child's behavioral objectives. The child's file was available to them and they participated in the daily evaluation session. Plans were made for a preschool staff member to follow the child's progress through the next year by means of observation and teacher contacts.

Parent Training Program

Parents are a child's first and most important teachers in life because of the strong bonds which exist between child and parent and the amount of time spent together. This learning relationship exists at least from birth and the success and satisfaction built into it propagates development. Although a person may have assumed the role of parenting it is not necessarily true that they have been prepared to do an effective job. It is the opinion of the preschool directors of this program that teaching is seen as the conscious manipulation of events to influence learning. Children with no learning problems learn a great deal from unstructured situations where environment and events are not consciously manipulated. According to Caldwell,

> Regardless of the external surroundings, however, this environment of the young handicapped child is, by definition, depriving. If there is sensory deprivation,

> he cannot take in the best of the environments that are around him. If he has any kind of motor dysfunction, he cannot move himself to a situation where the environment might make a better match with his own current developmental state. It is a clear situation of the old rule of the 'haves' and the 'have nots'. The 'have nots' continue to get less. It is very important, as we plan for any kind of environmental design or enrichment, to be aware of this point and to take it almost as a given when we talk about early programs for the handicapped. It is almost impossible to think of a handicapped child who does not have a deprived early development.[7]

Therefore, with learning disabled children people can more readily affect behavior through control of the environment of the child. Parents must control the elicitors and the reinforcers. The child then generates changes in behavior that are called "learning".

This structured learning in the home can be stimulated by numerous training techniques by the parents, for example:

1. Parent Effectiveness Training (P.E.T.)
2. Gross motor training
3. Sequencing and memory training
    a. visual
    b. auditory
4. Utilization of music in relation to learning
5. Auditory and visual training (association, discrimination and perception)
6. Articulation training

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[7] Bettye M. Caldwell, "The Importance of Beginning Early," in Not All Little Wagons are Red, ed. J. B. Jordan and R. F. Dailey (Arlington, Va.: The Council for Exceptional Children, 1973), p. 7.

7. Behavior modification training

8. Building and Applying Strategies for Initial Cognitive Skills (BASICS)

9. Others upon parent request or the needs of a particular group as viewed by staff

This preschool program used BASICS for Parents. Because the majority of the children in these classrooms lacked the skills which BASICS trains it was appropriate to utilize the techniques in the classroom and with parents. Parents met one day a week for two and one-half hours over a period of six weeks. This first training unit involved the attending skills which are observing, recalling, comparing and contrasting.

Ehrenberg, delineates these skills in the BASICS For Parents Manual,

> The skills dealt with in this introductory program: Observing, Recalling, Comparing and Contrasting: are sometimes referred to as Attending Skills. All build the child's ability to gather, retain, and organize information, as well as the ability to concentrate, listen, and communicate. All of these abilities are important to learning how to learn, in school and out. Developing Attending Skills was an important part of the research project from which the BASICS Program was derived. The children involved in this project were four, five and six year-olds from different backgrounds and with different abilities. In working with these children to develop their thinking skills, many difficulties had to be dealt with. Among them were the following:
>
> Short Attention Span-This will come as no surprise to anyone who has worked with young children. The ability to concentrate for increasing periods of time needs to be developed bit by bit. One things that helps is to be sure the child is working with someting that catches his interest. Another is to change what he is focusing on when his interest begins to lag. For example, if he is observing animals in pictures, change the pictures often, but continue the same task, observing. Another

thing that helps is to stretch the time a little each time. If he concentrates for only three minutes one day, try to stretch it to three and one-half or four minutes the next time. One caution, however, do not decide that the child's attention is gone just because he is moving around and looking elsewhere. Children often surprise you by responding to your questions when they seem not to be paying attention at all.

Possibly the two most important factors are open questions and acceptance of response. Asking a closed question which requires a 'right' answer usually produces more frustration than challenge and certainly can make attention wander in self-defense. A closed question that can be answered 'yes' or 'no' is often answered that way, and, again, conversation stops and attention strays. Open questions such as, 'What do you notice?' or 'What do you see?' invite the child's own ideas and as many as he can give. Follow-up questions and statements like, 'What else did you see?' and 'Tell me more about that,' tell a child his ideas are worth listening to. A person's attention is not likely to wander if the person he is talking to seems interested in what he has to say.

Limited Ability to Verbalize-Often children in the project seemed to notice things or remember things but had trouble expressing their ideas in words. This is a common problem, echoed by many preschool and primary teachers. Children can express ideas in many ways. They can be encouraged to imitate, act out, or show what they mean in some way. In the end, however, it is important that children learn from the earliest years to use words to express ideas. It is vital to the school experience, since the ability to verbalize is one important factor in learning to read. Here again, asking open questions and listening to the child's responses are tremedously important. Children need to practice using whatever language they have as often as possible. Listening and being listened to encourages more verbalization. More verbalization, over time, generally leads to better verbalization.

Inability to Work from Representations or Symbols-Some of the children in the research project who could work fairly well with real things such as real food items, real animal pets, their own experiences, etc. could not do as well with representations in the form of photographs, toy models, drawing, etc. With a picture, for example, the child often would look behind the picture for the back of the pictured thing. (You may have noticed this, too, when children talk as though TV characters lived inside the TV set.) Some children had even more difficulty when only written or spoken words were used. For example, one child might be able to give only one or two responses when just asked what he knew about dogs. The same child could say more about dogs when looking at a picture of a dog and even more when he had a real, live dog to look at and play with.

Dealing with this problem involves, first, providing children with many first-hand experiences with real things and opportunities to talk about them. He can be helped to make transitions from real to represented through photographs of things he has experienced in their real form (his pet, his birthday party, etc.) and by encouraging him to talk about these things when presented with the photos. He can also be encouraged to make his own representations by drawing, making clay models, etc. The same sort of transitions can be made from representations to words or other kinds of symbols, such as numerals. Skills of moving from real to representational to symbolic do not take place quickly. The fastest way, often, is to spend more time building a foundation with real things, rather than to rush the child to representation and symbols before he is ready to deal with them.

Inability to Attend to Part-Whole Relationships-Most often in observing, recalling, comparing and contrasting children tended to notice overall characteristics, such as color, size, shape, etc. While these are important characteristics to observe, they refer only to the whole and not to the parts of a thing or how the parts relate to the whole. For example, in observing a telephone you might notice that it is a certain color or made of a hand substance. If you do not also notice a part to dial, a part for listening, and a part to talk into, among others, you have not said much about a telephone. Likewise, if you do not relate these parts to how you use a telephone, you have missed the whole point.

We can see how important this ability is in a child's school experience when we note that, for example, when he is learning to read, he is asked to notice the first letter in a word, remember its sound and relate this letter sound to the other letters which make up the word. Another instance is when he learns to use the meaning of the rest of a sentence to figure out the meaning of an unknown word within the sentence.

We can help the child build this kind of skill by having him observe things that have parts that relate to the whole and by encouraging him to observe more than just overall characteristics such as color and size. One danger to watch out for is the possibility that the child gets so involved in observing parts what he loses sight

> of the whole. It is important, therefore, to keep his focus moving from parts to the whole and to see how the parts relate to the whole.
>
> Although all these difficulties and others encountered were not by any means completely overcome by all of the children in the project, the results showed that all of the children grew considerably. The children who received training in Attending and Classifying skills (Classifying is dealt with in Parent Program B) developed these skills more quickly and successfully than comparable children who did not receive the training. The results of this research project, along with the experience reported by countless teachers of preschool and primary children in schools all over the country, indicate that the consistent use of these techniques, over time, makes a significant difference in children's attitude and performance, both in school and out.[8]

Each training session was structured so that parents were given an overview of the skill; involved in an awareness demonstration; provided with behavioral objectives and rationale concerning the skills; provided with the specific techniques and questions; given an opportunity to develop a sample situation; and, finally a chance to try out the skill on each other. Classroom tryouts for these skills were scheduled individually for each parent.

At the end of the six-week training period, parents were asked for feedback concerning what they learned, what changes they saw in their children, what they felt brought about the change, what modifications they would recommend for the program, and what aspects they felt should be continued and why. These evaluations were in the form of a video taped parent discussion and written questionnaires. (See Appendix C, p. 113) Staff evaluations of the effectiveness of their roles in parent training sessions were done by means of analysis using video tapes and audio tapes of the sessions. The preschool directors critiqued each other's sessions as well as their own. Self analysis of the sessions utilized the BASICS Interaction Record (B.I.R.).

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[8] Sydelle S. Ehrenberg, BASICS for Parents (Miami, Fla.: Institute for Staff Development, 1972), pp. 55-8.

The final evaluation of the entire preschool program was held one week after the close of the classroom program. During this week various necessary tasks were performed:

1. Completion of individual files
    a. compilation of significant classroom work
    b. updating of prescriptive program
    c. compilation of daily logs for each child
    d. comprehensive final report
2. Parent conferences and educational planning and placement committee meetings when necessary as required by Michigan Mandatory Special Education Law
3. Preparation of final report to be presented to administration and boards of education
4. Completion of communications
5. Storage of materials and closing of classroom

The final evaluation meeting of preschool directors and administrators was devoted to a review of the final status of all the children in the program and evaluating the effectiveness of the pilot program. Discussion evolved around the feasibility of extending the pilot program into a nine-month program. It was decided to present to the boards of education a summary of the program, its results, the evaluations, and recommendations to better enable them to come to a decision about the program's future. The vehicles for reporting were a verbal review and recommendations by the preschool directors accompanied by slides and a twenty-three minute spliced video tape constructed to show all aspects of the program in function. Based on the results of the program, the preschool directors made the following recommendations:

1. That each school district (NICE and Republic-Michigamme) extend the pilot project to a nine-month program for handicapped preschool children

2. That one teacher and one aid be hired for each program

3. That a room in one of the school buildings be designated for a preschool classroom

4. That the screening process be conducted in the same fashion and continue to be done cooperatively each year

5. That parent training be an integral part of the program

6. That the materials not received for the pilot program be reordered

7. That time be allotted to the preschool staff for follow-up of children who were in the pilot program

8. That high school students be given an opportunity for experiences in early childhood education by participating in the preschool classroom as student assistants

9. That the children attend class for one-half day sessions, which should be held in the morning

10. That volunteer helpers from the community be sought out such as senior citizens and any other adults who might be interested in working with children

CHAPTER III

SUMMARY AND CONCLUSION

This preschool pilot program was developed because of the existing needs of handicapped preschool children in the rural setting of the Upper Peninsula of Michigan.

Two school districts and an intermediate district implemented the project cooperatively because of the need for the involvement of many people in the screening process. Two centers were established. Twenty children attended one-half day sessions for four weeks. Parent training was an inherent part of the program with weekly instruction sessions and tryouts with the children in the classrooms. The remedial work was facilitated by individualized prescriptive teaching.

In retrospect certain attributes of this preschool program appear to be unique:

1. The program resulted from the cooperative efforts among three school districts: NICE Community Schools, Republic-Michigamme Schools, and Marquette-Alger Intermediate School District.

2. The screening design created a naturalistic environment thus allowing the children to demonstrate their usual behavior patterns.

3. Parent training was an inherent aspect of the total program.

4. The same group of people were responsible for all aspects of the program thus resulting in unusual continuity.

Nine month preschool programs based on the model of this pilot program will be implemented in 1974-75 by the NICE Community Schools and the Republic-Michigamme Schools.

The pilot program provided sufficient data and experience to draw the following conclusions:

1. The budget should be decided and ordering done at a much earlier date. Many supplies did not arrive on time for the program.

2. It was found that the most valuable means of evaluating teacher performance and child performance was through the use of video tapes.and daily staff critiques.

3. Results of the donation drive in the local communities was gratifying. Many toys, books, and play items were obtained in this way.

4. The three speech and language clinicians involved in the screening process should have been part of the diagnostic staff. Their expertise would have contributed to a more comprehensive diagnosis. Unfortunately, budgetary limitations prohibited their involvement in the diagnostic week of the pilot program.

5. The training session for the speech and language clinicians who administered the DEPS should have been held more than one week before screening to allow them more time to practice administering and scoring the DEPS.

6. In the future the initial contact with the parents of those children selected for the classroom program should be a direct personal contact at an appointed meeting time. It was felt the first interaction with parents is fundamental to a good working relationship. A phone conversation, which was used, is not adequate for establishing that kind of foundation.

APPENDIX A

ORGANIZATION

TIME LINE

September 25, 1973 - Initial meeting with administration

December 5, 1973 - Submitting rough draft of proposal

January 28, 1974 - Meeting with kindergarten teachers and preschool directors

February 11, 1974 - Work meeting with preschool directors and administrators-ordering materials

February 18, 1974 - Presentation of proposal to Boards of Education

February 21, 1974 - Story hour contacts

February 27, 1974 - Interviewing

March 11, 14, 27, & 28, 1974 - Parent Teacher Association Meeting

March 29, 1974 - 1. Letters to parents
2. News release on screening

April 17, 1974 - Training session for screeners

April 22-26, 1974 - Screening

April 26, 1974 - Post Screening Follow-up meeting with administration

April 29-May 3, 1974 - Diagnostic Week

May 3, 1974 - Post Diagnostic Week Follow-up

May 6-31, 1974 - Classroom Program - news release

June 7, 1974 - Final evaluation meeting with preschool directors and administration
Final report to Boards of Education

June 26, 1974 - Republic-Michigamme

July 15, 1974 - NICE

OUTLINE

Cooperative Preschool Pilot Program
Republic-Michigamme NICE
Marquette-Alger Intermediate School District

I. Rationale
  - A. Ishpeming-results of
  - B. 1973-74 screening results-NICE
  - C. 1973-74 reults with no screening-Republic-Michigamme

II. Purpose of pilot program

III. Time Line of pilot program

IV. Program design and description
  - A. Development of concept
    - 1. Statement of need for preschool screening
    - 2. Awareness of need for follow-up
    - 3. Presentation to administration of rough draft of proposal
  - B. Writing and submitting of proposal
    - 1. Proposal
    - 2. Meeting with administration
      - a) discussion of funding alternatives
      - b) housing of program
        - (1) Health Department authorization
        - (2) Fire Department authorization
    - 3. Presentation of proposal to Boards of Education
  - C. Kindergarten teacher contact
    - 1. Request individual teachers to write minimum kindergarten readiness skills
    - 2. Notification of time and place of group meeting (kindergarten teachers and preschool staff)
  - D. Dissemination of general program information to the public
    - 1. P.T.A.
      - a) explanation
      - b) request for support
    - 2. Preschool Story Hours (Community School Activity)
      - a) explanation
      - b) request for support
    - 3. Panel Discussion
      - a) purpose
      - b) panel members
      - c) agenda

- 4. News releases
  - a) local newspapers
  - b) radio
  - c) television
  - d) school bulletins to district residents
- E. Meeting of kindergarten teachers and preschool directors
  - 1. Compilation of minimum skills for kindergarten entrance
  - 2. Discussion and decision to write a kindergarten readiness booklet for parents (kindergarten teachers' responsibility)
  - 3. Arrangement for feedback and preschool classroom visitations
    - a) release time and substitutes
    - b) dates for classroom visitations
- F. Work Meeting--preschool directors and administrators
  - 1. Financing
    - a) division of billing
    - b) salaries
      - (1) teachers
      - (2) aides
    - c) budget for supplies
    - d) mileage
    - e) duplicating services
  - 2. Transportation of children
  - 3. Procedure for hiring
    - a) posting positions
    - b) setting time line
    - c) interview procedures
  - 4. Decision on class site
  - 5. Finalization of screening process and scheduling procedures
  - 6. Evaluation
    - a) video taping
      - (1) use of VALID process (M.A.I.S.D.'s Project)
        - (a) equipment
        - (b) personnel
      - (2) schedule
    - b) audio taping
    - c) written individual behavioral objectives
    - d) parent evaluation
    - e) staff critiques
  - 7. Requisitioning of materials
    - a) ordering from school supply companies
    - b) contracting for equipment
      - (1) SWAM for preschool play equipment to be made to specifications
      - (2) TMI classroom for smaller equipment such as stacking blocks
    - c) request for available soft goods from district school buildings

        - d) donation drive in local communities for used playthings
        - e) diagnostic and screening materials
    - 8. Program personnel-sources and roles
        - a) professional
        - b) paraprofessional
- G. Interviewing (by preschool directors and administrators)
    - 1. Scheduling
        - a) main office scheduling (secretary)
    - 2. Questions
    - 3. Pre-classroom training requirements
        - a) BASICS
    - 4. Letters
- H. Training session for screeners (½ day)
    - 1. DEPS testers
    - 2. Play area observers
    - 3. BASICS
    - 4. Teacher aide roles
- I. Screening
    - 1. Scheduling, forms and letters
        - a) objectives
        - b) letters
        - c) blank schedule forms
    - 2. Test battery and history
        - a) BASICS
        - b) DEPS
        - c) play observation
        - d) Denver Test of Articulation
        - e) hearing screening
        - f) case history
    - 3. Physical setting
        - a) arrange for transportation of equipment to program sites
        - b) four-area division
            - (1) play area
            - (2) parent area
            - (3) quiet testing area
                - (a) hearing
                - (b) DEPS
            - (4) BASICS area
    - 4. Grouping and movement of children
        - a) stars indicating screening areas
        - b) use of play area as nucleus
        - c) one aide responsible for movement of children
    - 5. Staffing of children
        - a) daily
        - b) comprehensive (at end of screening week)

- J. Post screening Follow-up (one week)
  - 1. Comprehensive list
  - 2. Diagnostic week list
  - 3. Test-Retest in fall list
  - 4. Phone calls to parents
  - 5. Post cards
  - 6. Compilation of individual file folders
  - 7. Correspondence to screeners
  - 8. Post-screening meeting with administration
- K. Diagnostic week (one week)
  - 1. Introduction and rationale
  - 2. Personnel
    - a) responsibilities
    - b) sources
  - 3. Test battery for deeper diagnostic testing
    - a) Basic Concept Inventory
    - b) WISC
    - c) Stanford Binet
    - d) Purdue Motor Survey
    - e) ITPA
    - f) Boehm-Test of Basic Concepts
    - g) Goldman-Fristoe Test of Articulation
    - h) BERRY Developmental Test of Visual Motor Integration
    - i) Peabody Picture Vocabulary Test
    - j) Goldman-Firstoe-Woodcock Test of Auditory Discrimination
    - k) Goodenough Draw-A-Man
    - l) Frostig Developmental Test of Visual Perception (not appropriate)
    - m) Diagnostic therapy (most important)
    - n) Audiological testing
  - 4. Scheduling
    - a) number of children
    - b) centers
  - 5. Final Staffing (preschool diagnostic staff and administrators)
    - a) class placement
    - b) referrals
      - (1) other agencies and programs
      - (2) medical
      - (3) social-emotional referrals
    - c) identification of parents needing inservice programs
- L. Post diagnostic follow-up (one week)
  - 1. Write program objectives
  - 2. Write diagnostic reports for children participating in diagnostic week
  - 3. Plan lessons for first week of program
  - 4. Make notebook and blanks for keeping daily logs
  - 5. Duplicate dittos for use in first week of program

6. Contact all parents of children participating in diagnostic week
   a) post cards
   b) phone calls to those who will be in the program (In the future, make appointments with parents of all children participating in diagnostic week-to meet during post diagnostic week with preschool staff.)
7. Meeting with administrators
   a) classroom placement
   b) other results of testing
   c) bussing schedule
8. Setting up room
   a) bulletin boards
   b) organization of supplies
   c) physical arrangement
9. Storage and return of testing materials

M. Classroom program
1. Number of children
2. Length of day
3. Personnel
4. Expenses
   a) salaries
   b) major equipment and materials
   c) soft goods
   d) petty cash
   e) evaluation
      (1) video tapes
      (2) audio tapes
5. Publicity
   a) television
   b) radio
   c) newspaper
6. General structure of daily schedule
7. Areas of remediation
   a) rationale
   b) sample materials and references
   c) examples of activities
8. Specific daily lesson plans
9. Daily child evaluations
10. Preschool staff critiques
11. Parent skill try-outs in class

N. Parent Training Program
1. Rationale for parent involvement
2. Types of parent inservice
   a) Communication Skills Training
   b) BASICS
   c) gross motor training
   d) sequential memory
      (1) visual
      (2) auditory

    - e) utilization of music in relation to learning
    - f) auditory training
    - g) articulation training
    - h) others
  - 3. BASICS-type used during pilot program
    - a) rationale
    - b) schedule
    - c) content
      - (1) observing skills
      - (2) recalling skills
      - (3) comparing and contrasting skills
    - d) lesson plans for parent meetings
      - (1) notes
      - (2) awareness demonstration plans
    - e) evaluation
      - (1) video tapes
      - (2) audio tapes with BASICS Interaction Record (BIR)
- O. Final Evaluation Meeting with preschool directors and administrators
- P. Post program report to Boards of Education
  - 1. Comprehensive
  - 2. Slides
  - 3. Video tapes

APPENDIX B

PREPARATION

Cooperative Preschool Screening

DATE:

April 22, 23, 24, 25, and 26, 1974

PEOPLE TO CONDUCT SCREENING:

Rita Palomaki
Diane Koski
Steve Pascoe
Douglas Olien
Marlene Brunngraeber
N.M.U. Graduate Students
Home Programmers
Marilyn Pontti
Sherri Smith
Other Professrional therapists hired for screening purposes

TOOLS FOR SCREENING:

What areas do we need to screen in order to determine gross developmental lags?

Thorough notes on examiner impression.

1. A situation which can stimulate normal conversation and play patterns.

   e.g. Play center-last station

2. Some brief formal testing fine-motor.

   e.g. Berry

3. Auditory skills

   e.g. direction following some discrimination

   May want to develop our own tape-using DLM tapes.

4. Informal gross-motor

5. Predictive or Goldman Fristoe

6. Series of open questions

7. Language-tape analysis

8. Thomas Self Concept

FORMAL POSSIBILITIES:

DEPS

Basic Concept Inventory

Communicative Evaluation Chart

All scoring done by screeners.

REPORTING:

1. By phone
2. By postcard

WHERE TEST:

Three stations

North Lake - two days
Champion or Diorite - two days
Republic - one day

FOLLOW-UP:

One week of diagnostic therapy to make final decision on children who are candidates for a special preschool program. To include assessment in all areas through informal observation.

PROGRAM:

Several variations

1. two hours - twice weekly
2. Concentrated - six weeks every morning or afternoon at the end of the year
3. Both alternatives include a parent program
4. Each child's program be written according to objectives they need to attain to "be ready" for school entry

HOW TO PUBLICIZE:

1. Administrators
2. District Wide
3. Coop. Wide
    a. radio
    b. paper
    c. Action Shopper
    d. Notes - home for appointment

North Lake: PM - auditorium and cafeteria
Ely: AM - kindergarten and gym facility
Champion: kindergarten and gym facility

EXPENSES:

1. bussing
2. therapist for screening
3. our time and transportation
4. milk break
5. toys and books
6. soft goods
7. publicity
8. video tapes
9. post card and postage
10. aides for program

EVALUATION:

1. Baseline data week of observation therapy
2. Write behavioral objectives for individual children
3. Video-tapes and audio-tapes
4. Possibly using VALID process

NICE-Republic Proposed Co-operative Preschool Pilot Program

Summary and Rationale:

This is a concentrated preschool program, which, if proven to be effective will, hopefully be expanded to a regular nine-month classroom program. It has been an accepted fact that the area of preschool development is the most crucial learning period of a child's life. Further, it has been proven that early detection and intervention in dealing with speech, language, and learning delayed children can possibly eliminate or significantly lessen the number of school failures.

At present, 15 percent-20 percent of our present school population falls into the category of the unsuccessful learner. Interestingly, 50 percent of all learning takes place prior to school entry. Much of this learning takes place incidentally and noramlly. However, as pointed out earlier 15 percent-20 percent of our children are not developing speech, language and learning capabilities like other children their age, and at present we are doing nothing to fill in those developmental gaps or lags. Therefore, these children arrive at our schools, chronologically ready for school, but developmentally nowhere near age-norms. It is near impossible for the classroom teacher to deal effectively with the grossly delayed child. Therefore, unless something is done to give these children an equal opportunity to education through some preschool developmental program, we have already identified the potential drop-out. Hence, we must identify and deal with these children prior to school entry. With this in mind, we have designed the following pilot program. This program time-wise is not adequate, but is merely a beginning for further development of a program which will coincide with the school year, a program designated for preschool speech, language and learning development.

PRESCHOOL PROGRAM OUTLINE

I. Screening: April 22, 1974 thru May 30, 1974
  A. Children to be screened
    1. All four-year olds
    2. All three-year olds
  B. People to conduct screening
    1. School Psychologist (M.A.I.S.D.)
    2. Preschool Coordinator and Consultant (M.A.I.S.D.)
    3. Five Speech and Language Therapists
    4. Two Home Planners (M.A.I.S.D.)
    5. Five Teacher Aides
  C. Where screening will be conducted
    1. Ishpeming Township Hall
      a) National Mine children
      b) Ishpeming Township children
      c) East Ely Township children
    2. Michigamme Community Building
      a) Republic children
      b) Michigamme children
      c) Champion children
      d) West Ely Township children
  D. Screening Tools-90 minutes long
    1. Play situation
      a) Gross motor evaluation
      b) Thorough notes on observable behavior
    2. Fine-motor evaluation
      a) Berry Developmental Test of Visual-Motor Integration
    3. Auditory evaluation
      a) direction-following
      b) gross auditory discrimination
    4. BASICS Lesson
      a) Language evaluation
      b) Articulation evaluation
    5. Prerequisite kindergarten skills
      a) e.g. colors, numbers, writing name, etc.
  E. Staffing at the end of screening week
    1. Choose children for second week of diagnostic therapy or further referrals

II. Second Week-Diagnostic Therapy-Involving all screeners and aides, except three speech and language therapists
  A. Deeper diagnostic testing-formal testing whenever indicated
    1. BASIC Concept Inventory
    2. Thomas Self-Concept Inventory
    3. Formalized Psychological Evaluation
    4. DEPS
    5. Goldman-Fristoe Articulation Test
    6. Prudue Motor Survey
    7. I.T.P.A.
    8. Base-line data gathered on each child

- B. Staffing at the end of second week
    - 1. Referrals begun on children not eligible for program
    - 2. Selection of children for program
        - a) Writing of individual, or group, behavioral or performance objectives, needed to be accomplished by each child, based on baseline data collected and diagnostic information

III. Classroom Program
- A. Two centers (same as for screening)
- B. Length of day
    - 1. Two hours each center
- C. Number of children
    - 1. Maximum of ten per center
- D. Parent Involvement
    - 1. Parent training-two days per week
    - 2. Observation and try-out of skills learned in training in the classroom setting.
- E. Personnel
    - 1. Two certified speech and language therapists
    - 2. Teacher aide

IV. Expenses
- A. Speech and language therapist or person qualified in one of the following areas: learning disabilities, preschool
- B. Teacher aide
- C. Major Equipment
    - 2 tables and chairs-$34.95/table - $8.95/chair
    - Blocks-$50.00/set
    - Play plank and sawhorse-$25.00 each
    - Walk-across ladder-$20.00 each
    - Sand box and water tables-$85.00/table
    - Balls-all sizes-$24.00
    - Clown bean bag toss-$15.00/each
    - Housekeeping center-$150.00
    - Wooden trucks-$20.00 each set
    - Store-$39.95
    - Form boards-$12.00
- D. Soft goods or movable materials-$100.00 (Total)
    - Colored and white paper
    - Finger paints
    - Clay
    - Paste
    - Elmer's glue
    - Scissors
    - Crayons

E. Used-good condition materials (P.T.A.)
  - Dolls
  - Buggies
  - Toy cars (small)
  - Wooden puzzles
  - Tricycles
  - Costumes for dress-up

F. New materials (P.T.A.)
  - Building Men
  - Play Plaques
  - Dressy Bessy
  - Dapper Dan
  - Lincoln Logs
  - Coloring Books
  - Hard-covered Story books

G. Evaluation
  Video tape

H. Miscellaneous
  Milk break
  Mileage

V. Evaluation
  A. Behavioral objectives
  B. Video tape and audio tapes
  C. Baseline data
  D. VALID Process (M.A.I.S.D.)

VI. Publicity
  A. Administration
  B. District Wide
    1. P.T.A.
    2. Newsletters and notes to home
  C. Co-operative-Wide
    1. radio
    2. television
    3. newspapers

NICE Community Schools
Rte. 2, 905 School Street
Ishpeming, Michigan

Mr. James Alderton
Ishpeming Township Supervisor
Ishpeming, Michigan 49849

Dear Mr. Alderton:

The NICE Community Schools would like the permission of the Ishpeming Township Board to utilize the basement rooms of the Township Hall to house a six-week preschool speech and language program. The dates we would operate the program are April 22-May 31. During the weeks of April 22 through May 3, we would need the facility from 8:00 a.m. - 4:00 p.m. All the other days we would like to use your building (two downstairs' rooms) both in the morning and afternoon from 8:00 a.m. - 12:00 Noon and from 1:00 p.m. - 4:00 p.m.

This arrangement would only be for this year. Hopefully next year when the high school building opens there will be rooms vacated, which will enable us to house the preschool classrooms in the school buildings.

Your immediate action on this request would be greatly appreciated as our plans and purchases depend on the facility we are able to use to house our preschool program.

Please feel free to phone me at my office for further details. The telephone number is 486-6401. Your cooperation on this matter will be greatly appreciated.

Sincerely,

Norman Goethe
Superintendent

tkm

REPUBLIC-MICHIGAMME-NICE COOPERATIVE PRESCHOOL PILOT PROGRAM

Republic-Michigamme and NICE Community School Districts are cooperating in a concentrated pilot preschool program. If proven to be effective, hopefully it will be expanded to a regular nine-month classroom program.

It has been an accepted fact that the area of preschool development is the most crucial period of a child's life. Further it has been proven that early detection and intervention in dealing with learning and language impaired children can possibly eliminate or lessen the number of school failures. At present 15 percent-20 percent of our school population falls into the category of the unsuccessful learner. Interestingly, 50 percent of all learning takes place prior to school entry. Much of this learning takes place incidentally and normally. However, 15 percent-20 percent of our children are not developing language and learning like other children and at present we are doing nothing prior to school entry to fill in those developmental gaps or lags.

It was with these facts in mind that we decided to design an experimental preschool program for screening, followed by actual concentrated class-time for those children demonstrating a need.

The screening dates for Republic-Michigamme are April 25 and 26. All children ages three and four in the district should participate. The screening will be held at the Michigamme Community Building. A highly qualified staff of twelve people will be involved in evaluations of the preschoolers. At a later date, those people with children eligible for screening will receive further information concerning, appointments, length of time involved in screening etc. Hopefully parents of three and four-year olds will set some time aside in those two days for screening.

Those children selected for the special speech and language program will attend class afternoons, two and a half hours at the Michigamme Community Building for five weeks, the first week being mostly used for testing. The teaching staff will include Mrs. Rita Palomaki, Marquette-Alger I.S.D. Speech Therapist (serving Republic-Michigamme) and Mrs. Diane Koski, NICE Speech and Language Therapist plus a teacher aide.

One important note concerning the program is that all parents of children involved in the class will be active participants. They will be trained in various methods to assist their children and have an opportunity to experiment using their new knowledge with the children in the classroom. This is an essential portion of the preschool program, as we feel that parents are our best teachers-all they need is a little guidance in knowing what to do for their children.

As plans are further developed and refined, we will pass them on to you. In the meantime we need a little help from our friends. The schools have been extremely generous in providing the major equipment for our program, but there are a few things we would like to ask you for as donations. They are those little extras that will make the program even more effective.

USED - GOOD CONDITION

Dolls
Buggies
Toy Cars (Matchbox and Others)
Wooden Puzzles
Tricycles
Wagon
Costumes - for costume box
(big people dress-up)

NEW

Building Men
Play Plaques
Dressy Bessy
Dapper Dan
Lincoln Logs
Coloring Books
Good Hard-Covers Story Books
(Not Golden Books)

If you have any of these items or are interested in donating new items, we certainly would appreciate it. If so, drop them off at the main office any time. We are very excited about the potential of this program. Preschool education can make a big difference in the lives of those children developmentally delayed.

Dear Parents:

Our preschool program is now on its way and we are in need of your help. We are working on a limited budget, thus we find ourselves in need of some extras.

Please check around your houses and see if you have any of the following items that you can donate to our program. If so, please send or bring the items to the school building your chidren attend. Please send them on or before Friday, May 3. Your cooperation will be greatly appreciated.

The items are as follows:

books
tricycles
play dishes
toy food
housekeeping toys (brooms, mops, etc.)
toy silverware (also old silverware)
small cars and trucks
dolls and buggy
wagons
toy farm sets
Fisher-Price toys
Playskool Toys
lincoln logs
tinker toys
building blocks
doll clothes
dress-up clothes
ride-on toys
balls
play hats (space and football helmets)
and
anything else

Sincerely,

Diane M. Koski

Rita Palomaki

tkm

NEWS RELEASE

ACTION SHOPPER, Please Print.

A screening program for all children whose third or fourth birthday falls on or before December 1, 1974, is being conducted as part of the expanding services for preschool children in the NICE and Republic-Michigamme School Districts.

All parents of children enrolling their child for next year's kindergarten (1974-75) will receive an appointment date and time. It will be necessary for parents to call for an appointment if their child will not be entering kindergarten in the fall and will be three years old before December 1, 1974. Those parents of three-year olds residing in the NICE Community School District should phone the Ely Elementary School at 486-4276. Those parents of three-year olds residing in the Republic-Michigamme School District should phone the Republic-Michigamme School at 376-2277. Appointments should be made by Thursday, April 18. We hope you will make every effort to bring your child at the appointed time and place.

Screening sites and dates are as follows:

Ishpeming Township Hall:	Monday, April 22 (National Mine Preschoolers) Tuesday, April 23 (Ishpeming Twp. Preschoolers) Wednesday, April 24 (Ishpeming Twp. Preschoolers)
Michigamme-Community Building:	Thursday, April 25 (Ely & Champion Preschoolers) Friday (A.M.) April 26 (Champion and Republic-Michigamme Preschoolers)

The screening week is April 22-26.

The present screening program will provide an educational plan for those children who have apparent developmental lags. particularly in the areas of speech and language.

As a follow-up to the screening program, a pilot classroom will be conducted for those children exhibiting a need. This program is being established to determine the need for a nine-month preschool developmental program for the school year 1974-75.

January 28, 1974-Meeting with Teachers

Print first name - Caps and lower case (directions)
Grasp of Pencil

Use of Scissors
Fifteen minute attention span - listening
Concept of right and wrong
Follow One Step Commands
Concept of fourness, threeness, twoness and oneness
Identify by Name at Least six of the eight primary colors
Count to 10
Color reasonably well within lines (four inch circle)
Sharing
Alphabet - familiarity with sequence, song, possibly recognition
Realizing Simple Word Meanings
Sequencing - names (letters), (dressing) logical sequencing.
Gross Categorizing Shapes - grouping together
(similiar - different) (matching) (not identify) (letters)
Can trace large shape
Describe illustrations
Sound Play - rhyming
Recognize letters in their names

Preschool Total Budget

Materials and Supplies	$ 905.12
(2) Teacher Aides	720.00
Teacher Salary (Assistant)	935.00
Screeners Salaries	900.00
TOTAL	$3,460.00

Interview Schedule

Para-Professional (Aide) - 20 minute interviews

9:00 - 9:20 -
9:20 - 9:40 -
9:40 - 10:00 -
10:00 - 10:20 -
10:20 - 10:40 -
10:40 - 11:00 -
11:00 - 11:20 -

BREAK

Certified Staff - 30 minute interviews

12:00 - 12:30 -
12:30 - 1:00 -
1:00 - 1:30 -
1:30 - 2:00 -
2:00 - 2:30 -
2:30 - 3:00 -
3:00 - 3:30 -
3:30 - 4:00 -

*All interviews were conducted by the preschool directors and administrators.

Interview Procedures

A. Job Description

Teacher Aide
1. four hours per day
2. six-week program
3. BASICS prerequisite training
4. salary based on district contracts for non-teaching staff

Preschool Teacher
1. act as an assistant
2. four hours per day
3. six-week program
4. BASICS training
5. salary based on teaching contract

B. Program Description

C. Interview Questions
1. From your own personal experience, what do you feel a three or four year old child is like?
2. What do children this age like to do?
3. What are some things you like to do with children this age?
4. From your personal experience what should three and four year olds be learning?
5. How would you discipline a three or four year old child?
6. How would you let him know you like what he is doing?
7. What kinds of things do children ages 3-5 do that disturbs you?

Situation One

What would you do if a child purposely urinates? Messes his/her pants? Child throws a tantrum?

Situation Two

What would you do if a child was unable to verbalize his needs and desires?

Situation Three

What would you do if a child could not sit still during an activity?

DESCRIPTION OF THE NICE/REPUBLIC-MICHIGAMME PRESCHOOL SCREENING PROGRAM for DETECTING CHILDREN WITH DEVELOPMENTAL DELAYS

A. Goal and Objectives

To reduce future demands for services by minimizing school failure through a more effective preventative program:

1. To determine the developmental level of the preschool three and four year old child related to:
    a) auditory discrimination
    b) visual discrimination
    c) auditory reception
    d) visual reception
    e) auditory association
    f) visual association
    g) auditory sequential memory
    h) visual sequential memory
    i) gross and fine motor coordination
    j) directionality and laterality
2. To identify existing or potential learning problems by use of:
    a) thorough developmental history
    b) "DEPS" (Developmental Evaluation for Preschoolers)
    c) BASICS Language Evaluation
    d) motor skills and social interaction evaluation
3. To permit the teacher to develop an educational program to meet the needs of each child rather than to have children adjust to a program not suited to their needs
    a) To provide the classroom teacher with a prescription containing specific suggestions for remediating each child's difficulties in the specified areas
4. To provide objective data so that parents and school officials can make decisions whether or not a child should be enrolled in the special class to be conducted May 6-30.

5. To give parents an opportunity to work with their children in remediating learning difficulties

6. To provide data to the administration of the NICE and Republic-Michigamme school systems.

7. To determine the need for a nine-month preschool developmental program for the school year 1974-75

PRESCHOOL SCREENING
N.I.C.E. AND REPUBLIC-MICHIGAMME
SCHOOL DISTRICTS

March 29, 1974

Dear Parents:

As a part of our expanding services for preschool children, your school district and the Marquette-Alger Intermediate School District are setting up a preschool screening program for all children living in the N.I.C.E. and Republic-Michigamme School Districts, whose third or fourth birthday falls before November 31, 1974.

This screening program is part of a pilot preschool classroom program scheduled for May 6 through May 30. Funds for this project have been generously provided by the school districts and Title I monies.

Our screening staff has had extensive experience in preschool screening. Previous success in pinpointing learning problems, through screening in the preschool years, has proven invaluable in planning educational programs for those children who may need a little extra help before they can become successfully involved in a regular classroom program. The present screening program will provide an educational plan for those children who have apparent developmental lags particularly in the areas of speech and language.

All parents of children enrolling their child for next year's kindergarten (1974-75) will receive an appointment date and time. It will be necessary for parents to call for an appointment if their child will not be entering kindergarten in the fall and will be three years old before November 31, 1974. Those parents of three-years olds residing in the N.I.C.E. Community School District should phone Ely Elementary School at 486-4276. Those parents of three-year olds residing in the Republic-Michigamme School District should phone the Republic-Michigamme School at 376-2277. Appointments should be made by Thursday, April 11. We hope you will make every effort to bring your child at the appointed time and place.

Screening sites and dates are as follows:

Ishpeming Township Hall:	Monday, April 22 (National Mine Preschoolers) Tuesday, April 23 (Ishp. Twp. Preschoolers) Wednesday, April 24, (Ishp. Twp. Preschoolers)

Michigamme Community Building:

Thursday, April 25 (Ely & Champion Preschoolers)
Friday (A.M.) April 26 (Champion and Republic-Michigamme Preschoolers)

The screening week is April 22-26. We hope to see 270, three and four year olds. The following areas will be evaluated:

1. Speech and Language
2. Psychological
3. Motor
4. Visual & Auditory Perception

The week of April 29 through May 3 will be used to do more extensive evaluations on children indicating a need through screening. At the close of that week, 16-20 children will be selected-8-10 for each class site. The classroom program will be four weeks long from May 6 to May 30. It will provide help in the areas where each individual child exhibits a need.

We look forward to your cooperation in trying to help those preschool children who may have a more valuable school experience through our effort to help them in their early years.

Sincerely yours,

Carl Craftsenburg, Supt.
Republic-Michigamme S/D

Norman Goethe, Supt.
NICE Community Schools

Diane Koski, Speech Therapist
NICE Community Schools

Rita Palomaki, Speech Therapist
Marquette-Alger Intermediate S/D &
Republic-Michigamme S/D

P.S. Enclosed you will find a copy of the goal and objectives for the preschool program.

PRESCHOOL SCREENING APPOINTMENT SCHEDULE
SPEECH AND LANGUAGE

April 22nd --- National Mine

9:00 A.M.	18-4 and 5 year olds
10:30 A.M.	18-3 year olds (These registrations will be handled by phone by Mrs. Salmi at Ely Elementary)
1:00 P.M.	18-4 and 5 year olds

April 23 and 24 --- Ishpeming Township Children

9:00 A.M.	both days --- 18-4 and 5 year olds
10:30 A.M.	both days --- 18-3 year olds
1:00 P.M.	both days --- 18-4 and 5 year olds

April 25 --- Ely and Champion

9:00 A.M.	Ely - 18-4 and 5 year olds
10:30 A.M.	Ely and Champion - 18-3 year olds
1:00 P.M.	9-Ely 4 and 5 year olds and 9-Champion 4 and 5 year olds

April 26 --- Champion and Republic-Michigamme

9:00 A.M.	9-Champion 4 and 5 year olds, 9-Republic-Michigamme 4 and 5 year olds
10:30 A.M.	6-Champion 3 year olds, 12-Republic-Michigamme 3 year olds
1:00 P.M.	18-4 and 5 year olds

Testing Sites are as Follows:

Ishpeming Township Hall	April 22-National Mine Children April 23 and 24-Ishpeming Township Children
Michigamme Community Building	April 25-Ely and Champion Children April 26-Ely and Republic-Michigamme Children

*Mrs. Salmi will be handling all three year old appointments by phone at 486-4276. The three year old will receive this number through a mail notification.

PRESCHOOL SPEECH AND LANGUAGE APPOINTMENT SCHEDULE

Location ______________________________

Date ______________________ Time _____________________

Child's Name	Birthdate	Father's Name	Address	Phone Number

APPENDIX C

IMPLEMENTATION

"DEPS"

DEVELOPMENTAL EVALUATION FOR PRE-SCHOOLERS

John Sormunen
School Psychologist

Jeffrey Miller
Speech Therapist

NAME ______________________________ SEX ____________

ADDRESS ____

PARENT ____

EXAMINER ____

REFERRED BY ____

	YEAR	MONTH	DAY
Date of Test			
Birthdate			
Age			

MARQUETTE-ALGER INTERMEDIATE SCHOOL DISTRICT
427 West College Avenue
Marquette, Michigan 49855

copyright c 1972
by: John Sormunen
Jeffrey L. Miller
Marquette, Michigan

Birth - 6 Months

1. Rolls over	G
2. Responds to loud noise	R
3. Vocalizes sounds other than (crying, cooing) throaty sounds	E
4. Grasps rattle	Vm
5. Turns toward examiner's voice	R
6. Sits without support	G
TOTAL ______	

6 Months - 1 Year

1. Crawling	G
2. Imitates sounds (Mama, Dada)	R
3. Grasps with thumb and finger (pincher grasp)	Vm
4. Obeys simple command (Give it to me)	R S
5. Three words except MaMa, Dada	E
6. Walks assisted	G
TOTAL ______	

1 Year - 1 Year 6 Months

1. Puts a block in a box	Vm
2. Uses jargon with inflectional pattern	E
3. Walks unassisted	G
4. Picture Vocabulary (1)	V
5. Throws a ball	G
6. Points to body parts (3)	R B
TOTAL ______	

1 Year 6 Months - 2 Years

1. Builds a 3-block tower	Vm
2. Uses personal pronouns (me, she, mine, you, he, I)	E
3. Kicks a ball (forward)	G
4. Follows three separate directions	R S
5. Points to body parts (6)	R B
6. Word combinations (2 or more	E
TOTAL ______	

2 Years - 2 Years 6 Months		2 Years 6 Months - 3 Years	
1. Identification of Action Picture	R	1. Names body parts (8)	V B
2. Constructs a 5-block tower	Vm	2. Names objects (chair, car, box, key, fork)	V
3. Names one color	V	3. Gives full name	E
4. Walks with one foot on balance beam	G	4. Reproduces a vertical line	Vm
5. What does a kitty and/or a doggie say?	E	5. Repeats 2 digits-- 3 8 - 5 2 - 4 9	S
6. Picture vocabulary (3)	V	6. Says simple phrases and sentences	E
TOTAL ______		TOTAL ______	

3 Years - 3 Years 6 Months		3 Years 6 Months - 4 Years	
1. Walks on balance beam	G	1. Identification of Action Picture	R
2. Picture Vocabulary (10)	V	2. Responds verbally to picture	E
3. Reproduces a circle	Vm	3. Repeats 3 digits-- 3 7 4 - 2 6 5 - 8 5 7	S
4. Determines size comparisons	R	4. Hops on one foot	G
5. Hops on both feet	G	5. Uses pronouns and adverbs	E
6. Uses adjectives and prepositions	E	6. Mastery of m, n, ng, f, p, h, w	Ar
TOTAL ______		TOTAL ______	

4 Years - 4 Years 6 Months

Reproduces a +	Vm
Names 2 colors	V
Tells age	E
Produces a square	Vm
Visual Memory (3 objects)	R
Picture Vocabulary (14)	V
TOTAL	

4 Years 6 Months - 5 Years

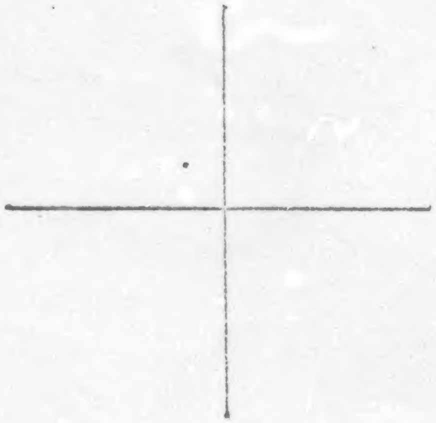
1. Draws a boy or girl	B
2. Catches a ball (10 feet apart)	G
3. Carries out 3 successive commands	R S
4. Reproduces an oblique cross	Vm
5. Comprehension	E
6. Mastery of y, k, b, d, g, r, s, sh, ch	Ar
TOTAL	

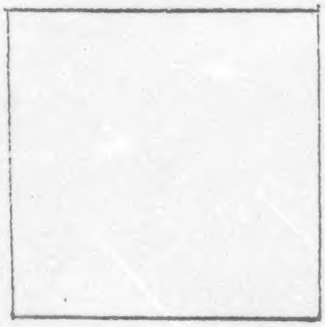
5 Years - 5 Years 6 Months

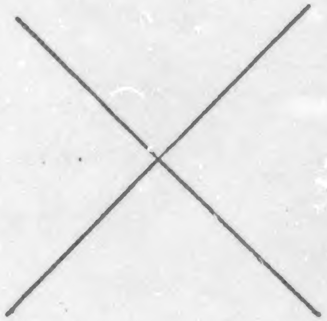
Reproduces a triangle	Vm
Names 5 colors	V
Skips alternately	G
Defines coat, ball, apple	V
Identifies forms	R
Mean length of response	E
TOTAL	

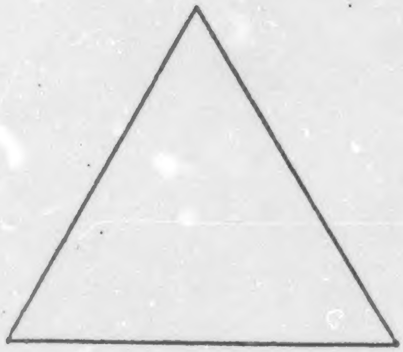
5 Years 6 Months - 6 Years

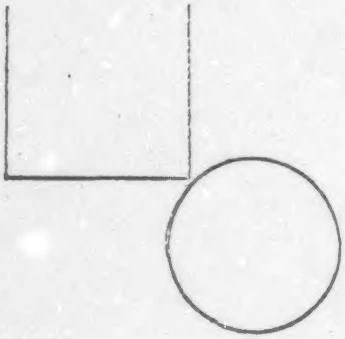
1. Open square - circle	Vm
2. Number concepts 3 -- 5 -- 8 -- 10	R
3. Fourteen syllable sentence	S
4. Mastery of t, v, l, th, z, wh, th	Ar
5. Recites a story	E
6. Determines differences boat-airplane, spoon-knife, shirt-coat	E
TOTAL	











ARTICULATION WORD LIST

WORDS	SOUNDS
telephone	t, l, f, n
feather	f, th, r
wagon - wheels	w, g, n, wh, l, z
scissors	s, z, r, z
chain	ch, n
ring, thumb, hand	r, ng, th, m h, n, d
brush	b, r, sh
vacuum	v, k, y, m
jumping	j, m, p, ng

DRAW-A-PERSON CHECK LIST

head ____

legs ____

arms ____

trunk ____

trunk - greater length ____

attachment - arms & legs ____

neck ____

eyes ____

nose ____

mouth ____

nose and mouth - 2 dimensions ____

nostrils ____

hair ____

clothing ____

clothing - 2 articles ____

fingers ____

fingers - correct no. ____

ears ____

eye brows ____

eye - pupil

DRAW A PICTURE OF A BOY OR GIRL

EVALUATION OF RESULTS

		AGE LEVELS		MOTOR DEVELOPMENT			LANGUAGE DEVELOPMENT			
		Chronological Age	Developmental Age	Gross Motor	Visual Motor	Body Awareness	Receptive Language	Expressive Language	Vocabulary	Sequential Memory
6 yr.	72 months									
5 yr.-6 mo.	66 months									
5 yr.	60 months									
4 yr.-6 mo.	54 months									
4 yr.	48 months									
3 yr.-6 mo.	42 months									
3 yr.	36 months									
2 yr.-6 mo.	30 months									
2 yr.	24 months									
1 yr.-6 mo.	18 months									
1 yr.	12 months									
6 mo.	6 months									
0	0									

SUMMARY AND RECOMMENDATIONS:

SUMMARY: ______________________________

RECOMMENDATIONS: ______________________________

BASICS Checklist

Able to observe	_____	Not observe	_____
Able to recall	_____	Not recall	_____
Able to clarify and extend	_____	Unable	_____
Attempts to clarify	_____	Unable	_____
Understands and notes concept of difference	_____	Unable	_____
Understands and notes concept of similarity	_____	Unable	_____
Utilizes complete sentences	_____	Unable	_____
Appropriate Grammatical Structure	_____	Inappropriate	_____

Describe:

Interaction pattern _____

____
Child's Name

OBSERVATION CHECK LIST

Gross Motor Skills

____ Jumps: from bottom stair (36)
____ Jumps: over rope less than 10 inches high (42)
____ Jumps: running or standing broad jump (48)
____ Hops: on one foot alternately (54)
____ Skips: using feet alternately (60)
____ Stairs: alternates feet going up (36)
____ Stairs: walks down, last few steps, a foot to a step (48)
____ Stands: on one foot, momentary balance (36)
____ Stands: on one foot for two seconds (42)
____ Stands: on one foot, 4 to 8 seconds (48)
____ Stands: on one foot more than 8 seconds (60)
____ Ball: throws overhand (48)
____ Rides tricycle, using pedals (36)

Comments:

Communication

____ Refers to self by pronoun rather than name (36)
____ Shows repetitiveness in speech (36)
____ Asks questions rehtorically (36)
____ Understands taking turns (36)
____ Calls attention to own performance (54)
____ Relates fanciful stories (54)
____ Bosses and criticizes others (54)
____ Asks meaning of words (60)

Comments:

Individual Play

____ Dramatization and imagination beginning to enter play (36)
____ Interest in combining playthings such as blocks and cars, making roads and bridges, etc. (36)
____ Considerable interest in constructive use of materials in manipulation and dramatization of play (48)
____ Has complicated ideas but is unable to carry them out in detail (48)
____ Is very active during play (48)
____ Likes to "dress up" (60)

Comments:

____ Play With Peers

____ Play with other children rather than alone (36)

____ Works together with one or more children in play activity (36)

____ Is willing to wait his turn (48)

____ Suggests taking turns but is often bossy in directing others and is often silly in his play and may do things wrong purposely (48)

____ Is spurred on in activity by competition (60)

Comments:

OBSERVER'S IMPRESSIONS

Reaction to change of activities -

Reaction to frustrations -

Ability to separate from parents -

Hyperactivity during play -

Expression of anger or fear during play -

Child's attitude during play -

Physical Abnormalities -

Selection of toys (in order of selection) -

Vision (do you question it?) -

Hearing (do you question it?) -

Others

PRE-SCHOOL HISTORY

Interview By: ____________________

Date of Interview: ____________________

I. IDENTIFICATION DATA:

NAME ____________________ AGE _____ BIRTHDATE ______________

ADDRESS ______________________ TELEPHONE NO. ______________

MOTHER'S NAME ______________ OCCUPATION _____ EDUCATION ____ AGE __

FATHER'S NAME ______________ OCCUPATION _____ EDUCATION ____ AGE __

NAME OF SCHOOL CHILD WILL ATTEND ________________________

OTHER CHILDREN IN FAMILY (in order of birth):

Brothers and Sisters:

Name	Age	Sex	Grade in School	Speech, Hearing, or Medical Problem

II. HISTORY:

A. Pregnancy

Problems (such as injuries, bleeding, drugs, measles, etc.)

____

____

B. Birth

Birthweight ________

Full Term ________ Premature _______

Delivery - Cesarean, Instruments Used, Normal ________

____

Qxygen Needed: ________________________________

C. Infancy and Early Childhood

1. Age of crawling_____, walking alone_____, talking____, toilet training____

2. Feeding Problems (such as colic, spasms, vomitting, etc.)____

3. Sleeping Problems________________________________

4. Speech Problems_________________________________

5. Delayed Speech (if so indicate age child began to talk)_____________________________________

6. Underline items descriptive of child: stutters,
lisps, bites nails,
sucks thumb

D. General Health

1. Physical Disabilities__________________________

2. Hospitalizations: Accidents____________________
Illnesses____________________

3. Convulsions___________________________________

4. High Fevers (how high______, how long_________)

5. Is child presently taking medication?___________
If yes, what type________________________ and
for what purpose__________________________

6. Allergies_____________________________________

7. Vision: Do you question it?____________________
Hearing: Do you question it?____________________

E. Social

Does child play well with: Self___older children_____ younger children________same age______________________

Is child happy_____ shy_____ withdrawn_____

aggressive_____ irritable_________

Does child display temper tantrums?__________________

(If yes, how frequently________________________ and

what is the cause of the tantrums________________)

Is discipline a problem?_____________________________

Circle discipline used with child: spanking, isolation, scolding, denial of privileges, talking, rewards, encouragement

What form is most effective?_________________________

III. Problems

Indicate any problems about which you might be concerned such as:

A. Speech and Language

Delay in talking_____________________________________

Unintelligible speech ______________________________

B. Motor Development (Does child appear to be well

coordinated__________________awkward________________

or have poor balance_________________________________)

C. Personal - Social areas

Inability to get along with others__________________

Withdrawn____

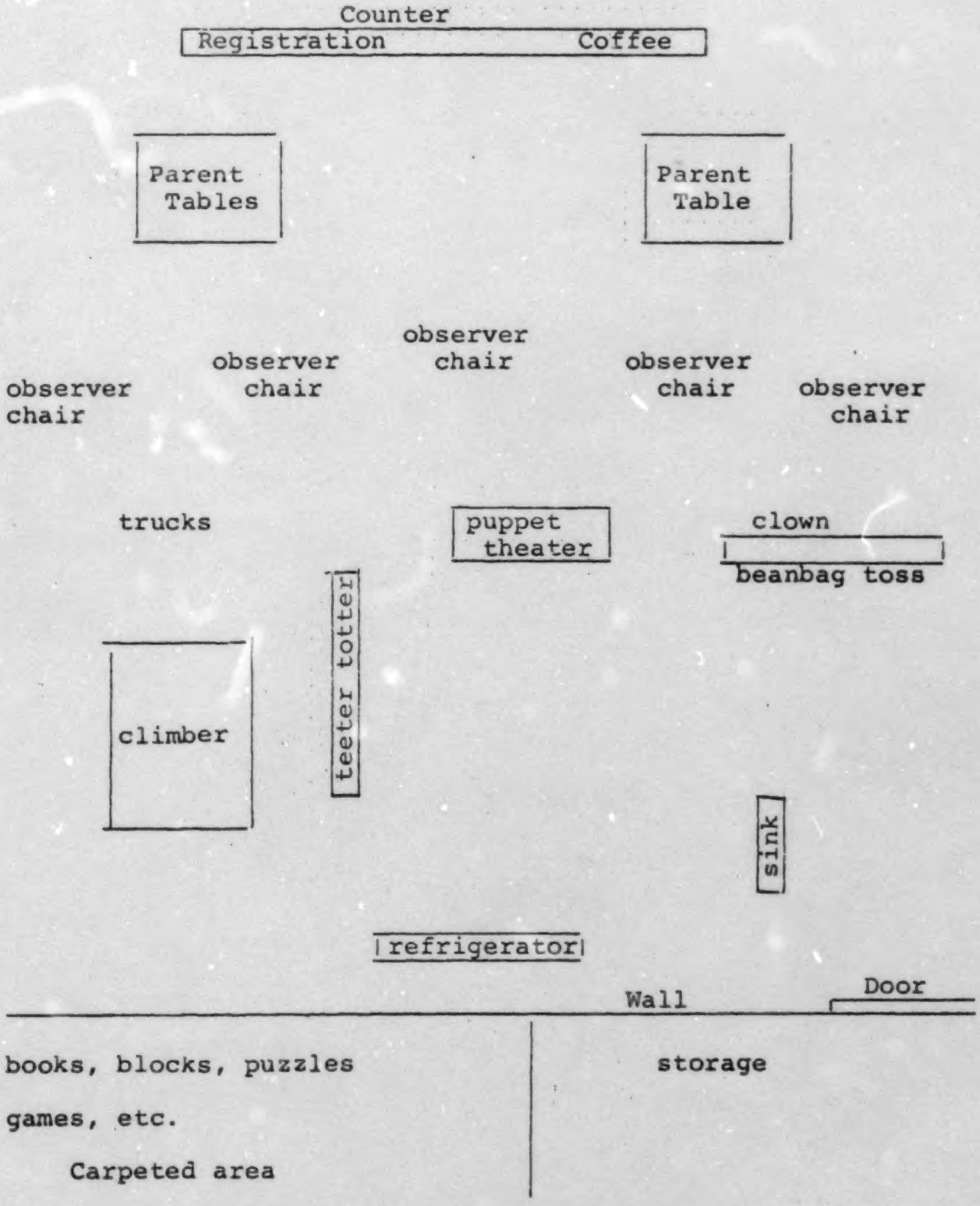
Short attention span_________________________________

D. Health Problems

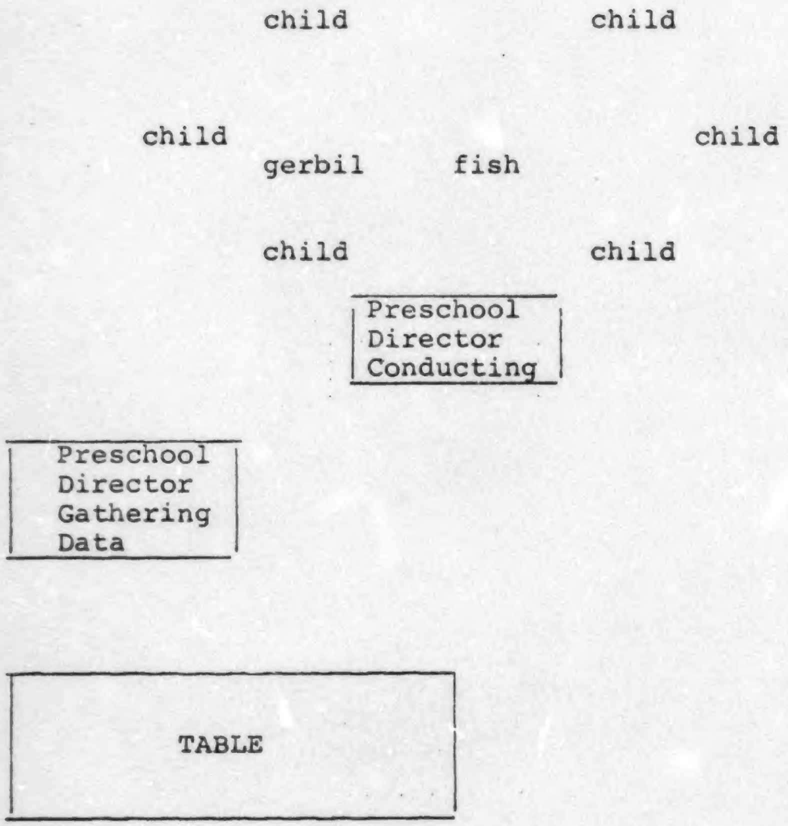
____

____

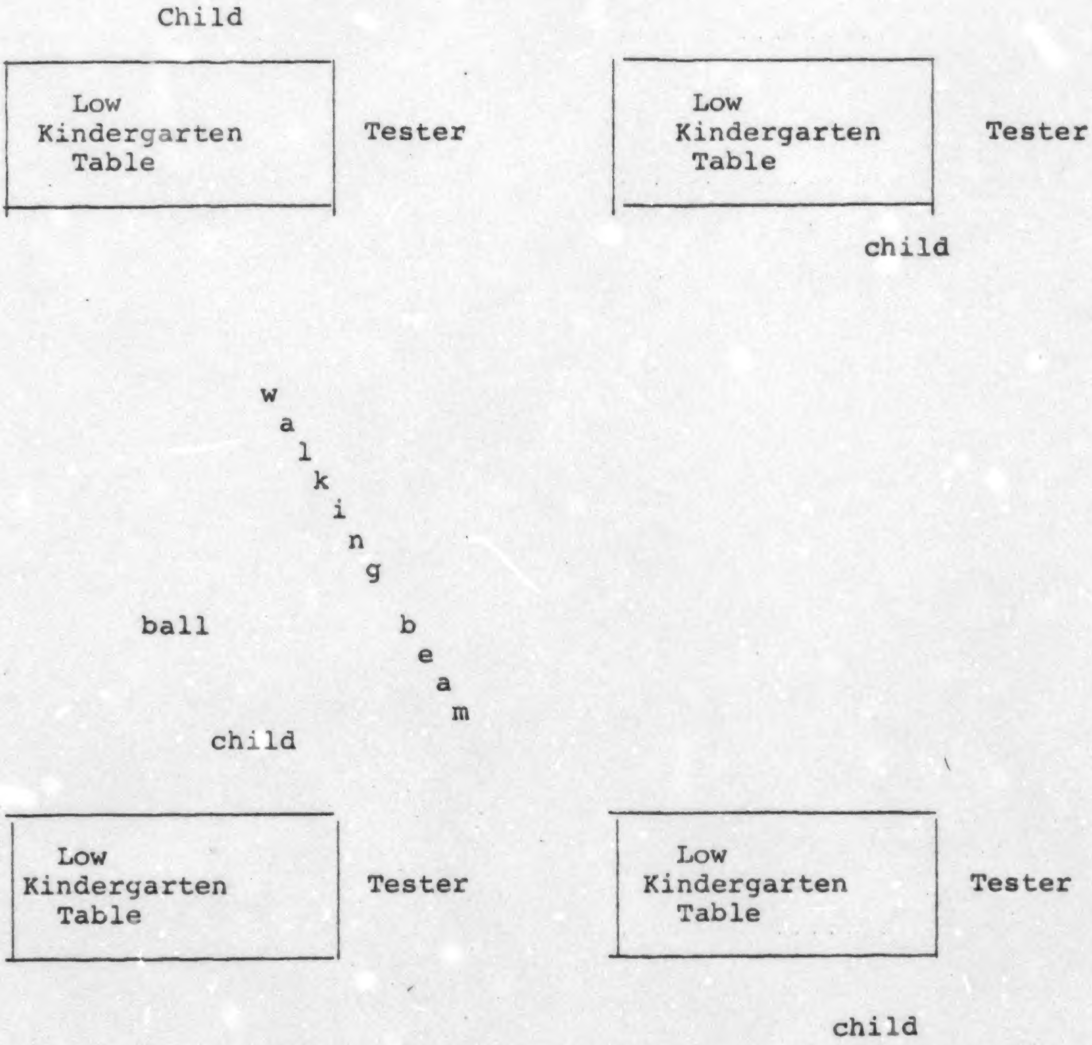
PARENT AND PLAY AREA DIAGRAM



BASICS Area


child
child
child
child
gerbil
fish
child
child
Preschool Director Conducting
Preschool Director Gathering Data
TABLE

Quiet Testing Area



Comprehensive List

Preschool Screening
NICE - Republic-Michigamme

NAME	BIRTHDATE	DISPOSITION

Preschool Program

DIAGNOSTIC WEEK LIST

NAME	BIRTHDATE	TEST TO BE ADMINISTERED

Parent Postcard Forms

Postcards mailed to parents with the following information:

For those with no problems:

Dear __________,

The preschool evaluation indicates that your child is developing at a normal pace. School should be a happy experience for ____________.

We appreciate your cooperation in participating in the 1974 screening program.

Sincerely,
Superintendent of Schools

For those who will be retested in the Fall:

Dear __________,

The results of the preschool tests on your child were not consistent. For that reason (he or she) will be rechecked in the Fall.

Thank you for your cooperation.

Sincerely,
Superintendent of Schools

For those tested last week who are okay:

Dear __________,

Last week's preschool testing indicated that your child's development in the learning areas is normal.

Thank you for your cooperation.

Sincerely,
Superintendent of Schools

For those who will be in the class:

Dear __________,

As you know from our phone conversation, _______ has been invited to participate in the four-week pilot preschool program. We are looking forward to working with both of you.

Sincerely,

DAILY LESSON PLAN

(Skeletal Design)
2½ hour period

25 minutes Opening

e.g. 1. Songs - "color" concepts
"number" concepts
self image
action songs
sequence songs

2. Finger plays
3. Nursery Rhymes

30 minutes Entire Group Activity/according to small group needs

Speech and Language

1. BASICS - spontaneous speech stimulation
2. Structured Language Patterning
3. Articulation therapy

30 minute/ 2 - 15 minute sessions

Individual goal work or group prescriptive learning basic skill work

1. fine motor
2. auditory training
3. haptic training
4. gross motor
5. physical therapy
6. lip reading
7. lessons designed to deal with the affective domain
8. etc.

20 minute Recess (Social patterning, e.g., personal hygiene, taking turns, manners and verbal social interaction)

1. bathroom break
2. snack

20 minute Total Group Listening and Sharing Activity

1. Stories
2. Puppet Plays
3. Filmstrips
4. Movies
5. Experiences to encourage emotional well being
6. etc.

25 minutes Total Group Gross Motor Activities

1. Structured gross motor activities
    a. games
    b. tumbling
    c. sequential gross motor act,
    d. etc.
2. Free Play
3. Closing
    a. self help (e.g., dressing responsibility for belongings and care of property)

CLASS ROSTER

1974

School District: ____________________

School Building: ____________________

NAME	D.O.B.	ADDRESS	PARENTS	TELEPHONE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

____
Teacher

Publicity Release Form

May 8, 1974

I give my permission for my child to be video taped and photographed during the preschool program. I also give my permission for publicity shots to be taken for newspaper publications.

Parent Signature

Child's Name

NICE COMMUNITY SCHOOL DISTRICT
Rt. 2, 905 School Street
Ishpeming, Michigan

EMERGENCY MEDICAL CARE REQUEST

School ______________________________ Date ____________________

Child's Name ____

In case one or more of my children becomes ill or is injured at school, please notify me at my home address.

Address ____

Phone ____

If I can't be reached, call ________________________________

or take him to

Dr. ____

located in ____

or to the ______________________________________ Hospital

or to any other physician available.

The teacher of _________________________ School is hereby authorized to follow the plan outlined above in handling emergency cases.

Signed by Parent _______________________

NICE Community School District #9

ACCIDENT REPORT: Complete in triplicate: one copy in Student CA-60, a copy to general office, a copy for building principal's file.

Name of Injured Person ______________________________

____
Street or P. O. Box

____
City and State

__________ Grade __________ Age

Name of School Building ______________________________

____
Street or P.O. Box

____
City and State

Date of Accident ____________ Time of Accident ______

A.M. ____ P.M. ______

Place of Accident ______________________________

Name of Activity ______________________________

How Did Accident Happen? ______________________________

____

Describe Injury ______________________________

____

Claim made on (1) Student Accident Insurance: Yes ___ No ___

(2) Parent's Insurance: Yes ___ No ___

Teacher or Supervisor at time of Accident ______________
Signature

Building Principal ______________ Signature ______________ Date

PROCESS or SEQUENCE OBSERVING

Sample BASICS Lesson Plan

CONTENT FORM CONCRETE

BEHAVIORAL OBJECTIVE(S)

To name a variety of characteristics of different animals.

PREPARATION

Arrange children in a circle on floor. Have only the animal being discussed in view. Put each away after the children have discussed it.

MATERIALS

Room pets--rabbit, gerbil and/or hamster, goldfish, guppies, parakeet.

SAMPLE ELICITING QUESTIONS

What do you notice about the rabbit?

What do you see?

What do you feel?

What do you notice about the gerbil? etc.

SUPPORT PROCEDURES AND ADDITIONAL QUESTIONS

- Take one animal at a time. Provide ample opportunity for children to look at and touch animal (except goldfish and bird).
- Seek a variety of observations. *What else do you notice about this rabbit? etc.*
- Encourage full participation. *What do the rest of you see?*
- If a child offers inferences rather than observed characteristics, e.g. *The parakeet is pretty*, ask for support, e.g. *What makes you think it is pretty?*

POSSIBLE RESPONSES

RABBIT	GOLDFISH
long ears	tail
gray hair	orange color
hops around	fins
whiskers	two eyes
two brown eyes	mouth looks like o
hops	makes bubbles
four feet	swims

PARAKEET	GERBIL
two wings	two ears
beak	long tail
two black eyes	nose
two claws	whiskers
green and blue color	four feet
feathers	brown color
sings	mouth
	furry

NICE and Republic-Michigamme
Preschool Program

May 16, 1974

Dear Parents:

Just a note to remind you of the preschool parent meeting tomorrow. The meeting time for parents of the children attending the program at the Ishpeming Township Hall is 9:30 A.M. That meeting will be at the Ishpeming Township Fire Hall. The meeting time for those parents of children attending the program at the Michigamme Community Building is 12:30 P.M. at the Michigamme Community Building.

The children should take the bus to the program as usual. It will be necessary for parents to provide their own transportation to the parent meeting.

Your participation in the parent group is vital to your child's progress. We are looking forward to having you with us!

Sincerely,

The Preschool Staff

BASICS for Parents

End of Program Reaction Survey

Question One:

Now that you have completed BASICS for parents - Program A, what has been most valuable of the things you've learned?

Parent Responses:

1. Everything
2. That we as parents could use more understanding as the needs of your children go.
3. I finally learned how to talk with my children.
4. To ask more questions, and the different ways of getting my child to think and open up more.
5. The use of skills. The ways of using reverse psychology on the child, so that he doesn't know it has been done to him.
6. I learned I didn't give enough attention to my son's speech development. There is more than just expecting children to start talking.
7. His attitude has improved for doing things and going places without people. A big improvement in his speech.
8. Listen, explain more about things.
9. How to get my children to talk more.
10. How to communicate with my kids better.
11. Mainly to listen to my child and give him a chance to express himself.
12. How to help my child learn.
13. I have learned to listen more to my child. I also learned how to use everyday situations to work with her.
14. I've learned the different size of things and color and how to ask questions.

Question Two:

What do you think the use of BASICS skills will do for your child in school and at home?

Parent Responses:

1. Give him a way to express his opinions and observations. Help him open up to the world around him.
2. Help him understand more.
3. It has taught him mostly how to sit and listen to what I say. At school it will help him in concentration.

4. It will help my child in every way. At home and at school with speech and everything, for she is only three, and needs help in everything.
5. It has made him more aware of things and people around him. It has brought him out of his shell with other people, therefore, he is willing to ask the questions where before he kept inside of him.
6. It will give him the ability to express himself with more confidence and the ability to understand what is told to him.
7. Help get along with other children. His attitude has changed for getting ready to go to school.
8. It will teach her to be interested and try to learn more about things - Differences, Senses, Likenesses, Listening, Remembering, Talking more in detail.
9. To look at things more closely and be more open.
10. It will help him to observe things more closely making him to read or look closer into things.
11. I think it will help him improve his attention span and really help him get more involved in the things around him.
12. It will help him to learn and give him more enjoyment while he's learning.
13. It will make her more sure of herself and help her to be able to communicate better.
14. Learned to listen and sit still.

Question Three:

What suggestions do you have for improving the program?

Parent Responses:

1. Longer or more frequent sessions for parents and children if possible.
2. None, because I think it really helps the kids.
3. My suggestion is for a longer time. I hope this is going to continue as my children really need help as I need help myself in helping them.
4. --
5. Longer sessions. Sessions not only with the teacher, but with the child.
6. Just keep up the good work!
7. --
8. I feel it should be of a longer period (a few months- instead of four weeks).
9. None. Everything is okay.
10. None
11. I would like to observe the teachers and children while they were carrying through with the suggestions you have given us.
12. If there were enough interest it would be nice to have it more as a neighborhood program.

13. My child has not attended every day, but I think this program has been excellent and helped her a lot.
14. None. Everything is just fine.

Question Four:

If another parent expressed an interest in BASICS for parents, would you recommend it or not? Why?

Parent Responses:

1. Definitely! I was truly shocked and surprised by what I've learned and by what I've seen in my child's progress.
2. Yes. Because it helps them.
3. I would recommend BASICS for parents as well as children because it's a great feeling understanding your children and helping.
4. Yes. It would help that parent to help their child in ways that parents did not realize the way to help them.
5. Yes. Because parents do not truly realize the needs of their children and the ways of getting them to express.
6. I certainly would! It's an education for the parent as well as the child.
7. Yes. It would help us to help our children.
8. Yes. Because I feel it helps the child to begin kindergarten learning to meet different classmates and teachers.
9. Yes. Because it helps.
10. Yes. Because in just a few weeks I can see the difference in my son.
11. Yes. It has been very helpful in understanding what the preschool program is about.
12. Yes. It gives the child a little more attention at home and prepares them for school.
13. Yes. It gives you ideas and helps to work with your child. Brings you closer together.
14. Yes. So the child would be interested in school.

Question Five:

Would you be interested in taking BASICS for Parents - Program?

Parent Responses:

14 - yes

Question Six:

Other comments and questions:

Parent Responses:

1. Please do all you can to inform parents and others involved in education of this program.
2. Should be continued.
3. --
4. For the teachers to talk to parents and to tell them what their child needs the most.
5. Please continue. This program has helped immensely, for parent and child.
6. --
7. None
8. --
9. --
10. --
11. --
12. --
13. --
14. --

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